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ABSTRACT

This assessment of food service needs in children's residential institutions is based on data gathered from visits to more than 350 children's institutions in 20 states and the District of Columbia and from nearly 1,200 responses to a questionnaire sent to every residential institution in every state. Findings indicate that children in orphanges, homes for the mentally retarded, juvenile detention centers and other residential institutions eat starchier foods, have less staff assistance and fewer rehabilitative programs than are deemed adequate. It is asserted that states have not appropriated sufficient funds to provide adequate cost-of-care increases for state wards; in addition, many states have neither adequate nutrition standards nor frequent reviews in licensing regulations. It is suggested that these and other factors combine to make a strong case for the inclusion of children's residential institutions in federal child nutrition programs. (GO)

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# WHOSE CHILDREN?

## An Assessment of Food Service Needs In Children's Residential Institutions

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April, 1975

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# "WHOSE CHILDREN?"

## An Assessment of Food Service Needs
## In Children's Residential Institutions

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Llewellyn Wood Greenwood
National Project Director

April, 1975

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The Children's Foundation is a public, nonprofit anti-hunger and food rights advocacy organization. We are based in Washington with a regional office in Atlanta and another soon to be opened in the Southwest. We monitor federal food assistance programs for children and their families.

In Washington, we keep track of legislative changes and food policy shifts. Through newsletters, fact sheets and organizing booklets we disseminate food program information to groups around the country. Working with local and national groups, we provide technical assistance and organizing help to ensure full and equitable implementation of federal food programs.

The Foundation is the only national anti-hunger organization in the country which is not federally funded. Support comes from such foundations as the Field Foundation, the New World Foundation, the New York Foundation, the D.J.B. Foundation, the Shalan Foundation, the Southern Education Foundation, the Mary Reynolds Babcock Foundation, the American Legion Child Welfare Foundation, the Methodist Church: Board of Global Ministries, the George Hecht Foundation for Children, the Moody Foundation, the Eugene and Agnes E. Meyer Foundation, the Rockefeller Foundation, the Rockefeller Brothers Fund and the Herman Goldman Foundation.

ACKNOWLEDGEMENTS

The Children's Residential Institution Project of The Children's Foundation has for eighteen months investigated food service needs of children's residential institutions. We tabulated more than 1,200 responses to a nationwide survey and visited nearly 400 institutions in 20 states. We have completed an area project in the District of Columbia and in the Texas triangle from Austin to San Antonio to Galveston. Two field projects, one through seven Southern states and another through ten Western states spanned the summer of 1974.

A project with the dimensions of this one owes much to many people for assistance and support.

We are indebted to the American Legion Child Welfare Foundation for a grant in support of the national project, the Moody Foundation for support of the Texas area project and the Eugene and Agnes E. Meyer Foundation for support of the District of Columbia area project.

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Llewellyn Wood Greenwood
National Project Director

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# INTRODUCTION

Nearly 300,000 American children currently live in residential child-caring institutions. They are the dependent and neglected among us, the abused, the mentally and physically handicapped, the emotionally disturbed, the incurably ill, the incarcerated.

As a child nutrition advocacy organization, The Children's Foundation was aware that the institutions in which these children reside are specifically excluded from the existing federal child nutrition programs. Why? Because, according to Congressional sources, no one had ever measured the need for their inclusion. Therefore, in 1974 The Children's Foundation decided to provide that measure as part of a nationwide study of food problems confronting children in residential care.

"WHOSE CHILDREN?" is a report of our findings. The body of the report and the recommendations are based on one and a half years of research, investigation, survey, and interviews touching every level of staff and every age child in nearly 400 institutions in 19 states and the District of Columbia.

Our findings are clear: although institutionalized children are being fed, they are not being fed well. The quality of their meals will continue to decline if costs continue to rise and community donations continue to decline; if Congress votes to terminate commodities to institutions and no compensatory legislation is enacted; if states refuse to enforce



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nutrition standards and remain insensitive to the cost of providing ample care for their wards.

Now during the spring of 1975 the Congress must decide if institutionalized children will, for the first time, be included in the National School Lunch Act. Never before have sympathetic legislators taken a first step to assure that the nutritional well-being of these children is as protected as that of other needy American children. The time is crucial---the Administration has proposed to Congress in the Budget for Fiscal Year 1976 that commodity distribution to institutions be terminated. The opportunity is at hand; the need is clear.

Institutionalized children are not eating gruel, but the quality of their meals has steadily declined. Worse yet, in order to meet rising food costs, rehabilitation programs are being cut back or cannot be initiated, and hiring of staff is frozen indefinitely. If these children were living at home, it has been estimated that 70% would be eating breakfast and lunch at school free with federal assistance. Because they are living in institutions, they are denied these benefits.

They deserve at least the same assistance as children on the outside. "WHOSE CHILDREN?" points out how they are not getting it.

Barbara Bode
President

Raymond Wheeler, M.D.
Chairperson



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# I.

## SURVEY OF CURRENT FOOD SERVICES: AN OVERVIEW

Fourteen-year-old Darrell Richards is on his way home. He attends a neighborhood school in the Midwest, and has been looking for an after-school job for weekend spending money. His curfew is 10:00pm on the weekends, plenty of time for sports in the park and movies with friends. Home right after school, four of Darrell's nine brothers are still eating an afternoon snack when he arrives. Darrell joins them around the kitchen table for what appears to the mother to be a full meal two hours before supper. She comments aloud at how much food it takes to fill teenage boys. The life Darrell Richards leads is not unlike that of many American teenagers -- except that he was adjudicated delinquent and he lives in a community-based group home. His houseparents come in twelve-hour shifts and don't work on weekends, rotating with a psychiatric social worker who assists with most of his emotional needs; his nine "brothers" are close to him in age and background.

In the Southwest, twelve-year-old Emily Garrett sits nearly motionless as her lunch is placed before her. Blind and mentally retarded, she gropes for her chicken with both hands and tries as best she can to consume the vegetables cupped in her palm. She

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eats as quickly as possible because if she doesn't, the children who can see may take portions of her food. No eating utensils are given to children in Emily's annex because of the harm one child is apt to inflict upon another with a fork or knife during mealtime. It has happened, yet there is no staff supervision during meals; low state funding prohibits hiring personnel beyond the present 1-24 attendent-student ratio. This institution, in which 200 mentally retarded children live, is touted at the state capitol as the country's model for modern institution design, the best that millions could build. But no one inside knows how much food Emily Garrett actually eats, and no one cares how she eats it.

Joseph Dunn does not know what the words "experiment" or "control group" mean but he has been in both for the last six months. He is one of twenty-five children at his home for dependent and neglected children who have been denied one-third of their animal protein intake and given a high protein flour made of glanded cottonseed (LCP). Twenty-five other children at the same home are allowed to continue their regular intake of animal protein. Joseph doesn't know that over the six months there is the possibility that gacypol will tie up the iron in his body thus causing anemia and/or an inability to digest properly. But the doctor conducting the experiment knows, and she is quick to tell you that there is complete medical coverage for the

children. She chose to use children in residential care because they are "more easily controlled". Living in institutions makes them more observable. Both USDA and private sources funded the experiment, in the hope of finding a cheap, abundant source of protein as an alternative to animal protein. For all purposes the experiment was successful; LCP derivatives are due to be sold commercially soon. But Joseph Dunn and his friends at the home deserve better. They deserve to not be used as "guinea pigs" no matter how sophisticated and well-intentioned the research.

Nearly 300,000 children like Darrell, Emily and Joseph currently live in over 4,000 residential child-caring institutions in this country. It is estimated that another 200,000 children are in residential care in adult institutions.

If a composite were to be drawn of the "average child" in a residential child-caring facility, that child would be a boy between the ages of seven and eighteen in a private, non-profit facility for predelinquents or delinquents housing from five to thirty other such children. He would live in the Midwest and attend public school in his community.

The concept of residential care has changed appreciably during the last five years. Yet despite the investigations and law suits, juvenile justice reform efforts, deinstitutionalization, and the



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trend toward smaller, community-based facilities, there has been very little emphasis on nutrition-related issues. As food costs spiral and community donations drop, how are meals affected? As states become derelict in their licensing procedures and reviews, what avenues for abuse open up? As payment for "cost of care" contracts go unpaid, what kind of food is being served and how is it prepared until payment arrives? The Children's Foundation project to study food assistance needs of children in residential care is the first of its kind. During the course of the project information gathered through the area coordinators and on-site visits by staff was supplemented with a questionnaire sent to the 4,239 residential child-caring facilities known to us. [1] Subjects covered in-depth on the questionnaire were food services (where children ate, who planned the menus using what criteria, how many meals children ate and what portions were served), per meal cost figures, and federal food assistance program participation -- if any.

Of the 4,239 child-caring institutions, 1,057 responses from the 1,146 received were tabulated. The size of responding facilities ranged from group homes with five children to correctional facilities with over 1,000 children. Respondents represented 69,171 children currently living in facilities with a total residential population of 79,923.



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A geographical distribution of all institutions for children known to The Children's Foundation and their percentage of response follows:

| Region | Residential Child-Care Institutions Surveyed | Residential Child-Care Institutions Responding | Percentage of Responses |
|---|---|---|---|
| Far West | 827 | 217 | 26% |
| Mountain States | 673 | 161 | 24% |
| Midwest | 1,064 | 310 | 29% |
| Southeast | 666 | 212 | 32% |
| Northeast (including: Virgin Islands and Puerto Rico) | 1,009 | 244 | 24% |
| Miscellaneous | - | 2 | |
| Total | 4,239 | 1,146 | |
| Average percentage of response: | | | 27% |

Food Services

"We try very hard to maintain a relaxed atmosphere at the table, very much the way families do. We all sit down and eat together for breakfast and supper. Although we encourage conversation at the table, we expect the children to mind their manners and keep their voices down."

Houseparent
Indiana Group Home



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The desire to create this type of atmosphere prevails among survey respondents. Meals are served "family style",i.e., from the table by 63.8% of the facilities, while another 23% served their children cafeteria style. The most popular place in which to eat remains the central dining area, where 70% of the meals are served. Yet 20.3% of the responding facilities -- particularly the larger ones -- now prepare and serve meals in the cottages or decentralized dining areas. Most institutions agree that the smaller dining arrangements are more personal and therefore more desirable. Special exceptions are made for bed-ridden or severely handicapped children served in their rooms from a meal cart.

A surprising 66.7% of responding institutions allow children therein the freedom to eat away from the institution biweekly. Among the times when meals are taken outside the institution are : weekends with families and friends, during school (lunch), field trips, church suppers, and summer programs. The majority of the 66.7% of the facilities reported that the children for whom they care combine two, three and often four of the opportunities to eat away. Since the 32.3% <u>not</u> allowed to eat out biweekly corresponds closely to the sum of profoundly retarded children and those held in "secure" facilities (i.e., detention centers and correctional institutions for juvenile offenders), one would assume by the statistics that unless a child is



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non-ambulatory or locked up, he has the same freedom to eat away from home as his peers living in families. But countless interviews proved this an incorrect assumption. Director after director made it clear to The Children's Foundation that when the children eat away they either take along food from the institution kitchen or don't eat; there are virtually no funds available for eating away from the institution. Moreover, restaurants which once offered free meals to the children on special occasions -- birthdays and holidays -- no longer offer them. Directors blame the cutback of free meals on the high cost of food. Thus, our investigations show that although 66.7% of child-caring facilities offer their children the freedom to eat away from home, in fact, the children rarely eat food prepared any where else.

Institutionalized children are therefore captive consumers, eating what the institution prepares or not eating at all. Their problem is further magnified by the fact that barely 15% of the surveyed institutions employ or use the consultative services of a nutritionist or a dietician in menu planning. The composite of a person preparing the meals in a child-caring institution is a cook employed full time who looks to menus on file in the institution for criteria in planning the menus.

"The RDA is the accepted standard for menu planning. If only 10% of the respondents used this measure, I would encourage them to use the consultative services of a registered nutritionist. Even four hours a week would upgrade delivery. Every state and many counties have a position for a nutritionist. State and county operated facilities receive services free; the average fee for paying facilities is $10.00 an hour. Cost may be a drawback."

Elaine Blyler, President
Society for Nutrition Education

In one Southern detention center, the county jailer whips up the meals for the detained children and wheels the warm meals across the street on a meal cart from the jail. Another respondent noted that the jailer's wife did all the cooking "and it's very good homecooked food, too".

The typical facility serves the children a set plate, but 44% of the children are limited in their servings. Second helpings are denied to many of them. "They can eat seconds," many respondents told The Children's Foundation, "but not unless there's enough for everybody to have seconds." Although 77% of the respondents serve milk at each meal, 20% do not allow second servings.

On paper, the food service situation in children's residential institutions does not appear critical. Yet when asked if the food services had represented a change from one or two years ago, 80%

responded that there had been changes for the worse. For instance, some institutions that once served milk at every meal have cut back to two servings daily. Others that still serve milk thrice daily are no longer able to serve seconds. Still others have had to add meat extenders to dishes to cut back drastically on the servings of beef and pork. Fresh vegetables and fruits are served less frequently. Snacks and desserts in many facilities have been decreased and in some cases eliminated on certain days of the week.

When food service deteriorates, it is the institutionalized child who suffers. He remains the captive consumer, unable to go out for meals, eat at a neighbor's house, or pick up a snack at a local store.

Cost Figures

> We are a home for unwed mothers. We have tried to keep costs down by charging only $8.00 per day. Because of this, each year we still go in the red $65,000. Now that we are not getting commodities, we are really suffering financially. The United Appeal pays us only $30,000 of the $365,000 budget.
>
> Letter to The Children's Foundation
> Signed by entire staff of
> The Home of Redeeming Love
> Oklahoma City, Oklahoma

What does it cost to feed an institutionalized child? Figures vary tremendously, depending upon the age of the child



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and the size and type of the institution in which the child resides. A teenager will eat more than a four-year-old; a young woman who is pregnant requires more protein-rich food than one who is not. In a facility for severely retarded children whose food is pureed, food costs are lower than they are in a facility for children able to swallow whole foods. When there is less access to the kitchen, costs are lower. For instance, it costs less to feed bedridden children served a set plate in their rooms from a meal cart three times a day than it does to feed children who can have a number of servings at the table and can raid the refrigerator at will. The larger the population of an institution, the lower the average cost of meals per day. A group home in which adjudicated boys, ages 13 to 17 reside is most likely to have the highest of any per day food figures. Figures supplied through the survey and averaged by The Children's Foundation are as follows:

| Meal | Actual Cost Per Child Per Day |
|---|---|
| Breakfast | $0.57 |
| Lunch | 0.71 |
| Dinner | 0.94 |
| Snack(s) | 0.31 |

Instead of breaking down figures into figures for each meal, many more respondents gave only a total per day figure since they were budgeted per day and not per meal. Consequently, the total cost of meals per day represents more respondents in the average --

the figure is $2.12 and not the sum of the above figures, $2.52. Institutions report that they spend an average of $0.24 more than they are budgeted per child per day.

As stated earlier, costs vary with the size of population. The smaller the institution, unfortunately, the higher the cost of meals.

| Capacity of Facility | Average Cost of Meals |
|---|---|
| 1 - 30 | $2.40 |
| 31 - 100 | 2.04 |
| 101 - and over | 1.74 |

Raw food costs for the responding institutions ranged from $40 to $83,572 per month, averaging $3,878.75 monthly. Adding other expenses generally included in a total food cost -- expendable supplies, maintenance and purchase of kitchen equipment, and the institution's share of school lunch costs -- the average cost increased to $4,360.25 per month.

Of the 1,057 respondents, 778 told The Children's Foundation that the amount they quoted for a monthly "total food cost" was 15% higher than the same figure one year ago. Only 47 of the 1,057 said that their figure was lower than last year; it was lower they noted, only because they were serving fewer children.

Forty-six percent of child-caring institutions have some



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outside food source. Unfortunately, these donations only defray monthly food costs by 4%. Five hundred and one of the survey respondents reported that they have no source of food outside their budgeted amounts. Of the other 556 who do have outside food, the following is a source breakdown:

71.4% receive USDA donated commodities;
3.4% receive produce from a state or county farm;
29.0% receive gifts of food from area farmers and merchants;
22.0% grow produce in gardens on the grounds;
14.7% receive food donations from community sources;
8.9% receive meals or canned foods from churches.

Respondents with outside food sources received donations per month averaging $150, although the most frequent response was $50. This amount, of course, assigns a money value to USDA donables as well as to other sources.

Federal Food Assistance Program Participation

No federal food assistance program has yet been legislated specifically for children in residential care. Yet a sprinkling manage to appear in the participation figures, despite the complication of eligibility facing them.

An amendment to the Food Stamp Act opened eligibility to any persons participating in a private, non-profit drug or alcohol

rehabilitation program, either as a resident or a non-resident. Those in care are allowed to pay for a hot meal with their food stamps. Despite the number of facilities caring for children with drug-related problems, none of the children in responding facilities currently receive food stamps.

Children in residential care, do -- in isolated instances -- participate in programs under the National School Lunch Act and Child Nutrition Act. (Problems preventing full participation are explained on pages 32-4.) Only 2.5% of respondents have children currently participating in the Special Food Service Program (Section 13). A meager 1.3% have children currently participating in the Summer Feeding Program. A heartening 49.3% have children currently participating in either the Special Milk Program (Section 3) or receiving a federally-subsidized school lunch. Data gathered, however, indicates that most of those children pay a full or reduced price for their meal at school. Of the 51,643 institutionalized children currently attending school, only 18,773 (36%) eat at school free.

Judging by the responses from surveyed institutions, the reasons for non-participation in the School Lunch Program vary:

Children are not eligible -- 10.7%;

We do not know if the children are eligibile -- 14.4%;

Children eat lunch at the institution, not at school -- 14.1%;



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Institution does not participate in any federal programs -- 13.9%;

Children attend a school which does not participate -- 24.6%;

Children attend a school which cannot participate -- 18.6%.

Whatever the reasons, participation remains low and probably will not significantly increase under the National School Lunch Act as it is now designed.

Further, 25% of the children in child-caring facilities cannot attend school and consequently cannot look to the child nutrition legislation for any benefits. It is indicative of the desperate need for alternative food sources that 63% of the respondents not participating in the National School Lunch Program requested that The Children's Foundation supply them with information about participation.

## II.

## THE RISE AND FALL OF DONATED COMMODITIES

> "Distribution to institutions should be phased down as much as possible, thereby minimizing the flak that will be received if and when complete termination takes place, i.e., on June 30, 1975.... There will be some difficulty in terminating help to institutions, but this can be overcome. The much more difficult battle will be with the child nutrition lobby. [One] strategy should be to provide an adequate carrot in the form of cash to at least diminish their opposition."
>
> Recommendation to Secretary of Agriculture Earl Butz from Assistant Secretary Clayton Yeutter January 25, 1974

The controversial "Yeutter memo", released by Senator George McGovern in February, 1974, confirmed for the first time the rumor that USDA wanted to get out of the commodity distribution business. The disappearance of traditional agricultural surpluses, combined with long term dissatisfaction over the quality of the donated commodities, were certainly factors in the decision. In addition, it became clear that the Department had developed a definite preference for programs which utilized existing retail networks over those which required the direct purchase and distribution of foods to those in need. The Department's intention was to replace each of its commodity programs with some form of cash or voucher system. Schools and day care centers



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would get a cash equivalent; commodity supplemental programs would transfer to WIC, and families receiving donated commodities would move to food stamps. Only one group of commodity recipients were to receive no compensation -- the residential institutions.

Their federal food assistance was designed for the benefit of the farmer and not the child, and it has been in existence for forty years without noticable change in favor of the child.

Historical Background

During the Depression, much of the production of American farms had no market, and the prices of agriculture products declined drastically. Federal assistance became essential. Section 32 of Public Law 320, approved on August 24, 1935, provided the first significant authority for Federal food donations. The legislation made funds available to the Secretary of Agriculture to encourage the domestic consumption of certain agricultural commodities by diverting them from the normal channels of trade. The intent was to remove price-depressing surplus foods from the market through Federal purchase and to dispose of them with normal sales. Needy persons in institutions were among the early beneficiaries of these donations.

A further source of Federal food assistance to institutions was brought about under the provisions of Section 416 of the Agricultural Act of 1949, when that legislation was amended in



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1954. The Act authorizes the Commodity Credit Corporation to donate commodities acquired under its agricultural price support activities to various agencies, among them charitable institutions, to the extent of the needy persons served by them.

Further legislative authority for the Department was provided by Section 709 of the Food and Agriculture Act of 1965, which authorized USDA to purchase dairy products on the open market when they are not in sufficient supply in inventories of the Commodity Credit Corporation. This authority is used infrequently.[2]

These acts in combination allowed "charitable institutions" a range of fourteen commodity items[3] estimated at $3.144 per person per month (wholesale value, 1972).

By 1972, the "land of plenty" had sold off or used up its abundant surplus foodstuffs. Unfortunately, for institutionalized children, surpluses disappeared and prices rose beyond USDA authority to purchase at the same time that higher food costs made institutions more dependent upon donables than ever before. The Department's move away from commodity distribution was partially but not entirely blocked in July of 1974 by Public Law 93-347 which extended most commodity programs to June of 1977, giving the Secretary the authority once again "to purchase ...agricultural commodities and their products of the types



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customarily purchased under section 32 for donation to maintain the traditional level of assistance" for institutions, among other commodity recipients.

Then, in what appeared to some observers as direct defiance of the intent of Congress, the USDA General Counsel interpreted "traditional level of assistance" as appropriations, not quantities of donated foods for institutions. Since appropriations are proposed by USDA and approved by Congress, they continued to drop. The program became bogged down, and fewer and fewer donated foods found their way to the institutionalized Americans who needed them. For FY 1973, Congress appropriated $24.2 million for commodities to institutions; for FY 1974 the amount dropped to $18.8 million; and for FY 1975 a new low of $16.7 million was reached. For FY 1976, USDA has proposed that Congress appropriate no funds for commodities to institutions.[4]

While the extension helped to avoid immediate disaster for institutions and other commodity recipients, it is important to recognize that the Department can and does find ways to reduce commodity distribution despite the law. For instance, the USDA decision to purchase no dairy products or grains during the spring and summer of 1974, left institutions -- literally and figuratively -- with peanuts. "How many recipes can one find using peanut granules?" asked one harried cook. Then the Department decided that it would no longer provide either



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vegetable oils or grains in the commodity package. No redonation between states would be made, causing serious problems for programs which have always relied heavily on redonations from neighboring states. While commodity distribution has not been formally cut back, most commodities for institutions are not available, either because USDA does not purchase enough to go around or because it does not purchase certain commodities at all. As a bureaucratic tactic, USDA's behavior might be termed malicious obedience of the law.

> "Cutting back on these staples is like the Government just couldn't care less about them [the mentally retarded children in his facility]. They always get left out, but I'll keep on doing the best I can for them, even if the Government won't."
>
> Cook
> Minnesota Home for Children

Since July, 1974, the Department has chosen to purchase for institutions only price support (Section 416) items, i.e., nonfat dry milk and butter. Institutions would no longer receive grains or salad oils -- two staples they could ill afford to purchase at the grocery. USDA blamed the deletion on high market prices; many institution personnel blamed the Soviet Wheat Deal. "I can hardly believe," wrote one, "that our National Government is more concerned with the peoples of Europe, the Far East, the Near East, etc.,than with the health of their own children, the FUTURE LEADERS OF THIS GREAT NATION."

"A nasty case of not mending our own fences first," remarked another.

Now the number of donated foods has dropped to two items, and it is obvious to state administrators that the Department is not interested in sustaining commodity distribution for institutions. The result: Many eligible children are not receiving any commodities mainly because of distribution problems within the states. Some residential institutions receive their donated commodities only if shipment can be consolidated with schools or service institutions, as in Georgia and Arizona, yet that cooperation is by no means nationwide. "We even made arrangements with the local school district [so] that our orders could ride in on theirs," one home in Hays, Kansas, told The Children's Foundation this summer, "but this was not allowed." As of September 1, 1974, Kansas discontinued its commodity program in all categories. Schools receive cash reimbursement; institutions -- and there are 81 for children -- receive nothing.

Who Gets Commodities?

Of the child-caring institutions surveyed by The Children's Foundation, 71.7% participate in the commodity program as institutions. Despite the fact that the average number of donated foods dropped from six to four items in one year (April, 1973 to April, 1974) and that by December, 1974, the range had



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decreased to two or no items, an overwhelming 86% reported strongly that they needed the program and that it should continue. When asked to comment on the commodity program as it affected them, most respondents were wholeheartedly in favor of the program despite criticisms of the needless red tape involved, the meager amounts of commodities received, and erratic distribution.

---

"Commodities should continue to be made available in order to continue present high nutritional feeding program. Their loss will make it necessary to lower our present feeding standards due to continual rises in food costs, which are far ahead of our budget increases."

Youth Service Administrator
Youth Correction Facility
Englewood, Colorado

"I feel that with the high cost of food, any amount we receive through the [commodity] program, helps give the children a well-balanced meal for less. The quality of donated foods is excellent, and I realize [USDA] sends what it can."

Director, Youth Camp
Walsenberg, Colorado

"There is an urgent need to keep the commodities coming. Is there no way we can get the commodities -- fruits, chickens, and ground beef -- that schools get?"

Director
Home for Dependent Children
Florida

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Only 1.6% of the 1,057 respondents indicated that the number of commodities currently being delivered were not worth the trouble.

As costs at the supermarket continue to rise, donated commodities account for a larger and larger percentage of the total food budget for child-caring institutions. For instance, USDA figures for 1971 showed that in 68% of participating institutions, commodities represented 5% or less of the total food costs; in 90% of the institutions commodities represented 10% or less. Three years later those percentages had increased dramatically. In 68% of the responding institutions, commodities represent 9.5% or less of the total food cost; in 90%, commodities represent 19% or less of the total food costs. Percentages vary widely -- ranging from less than 1% to 33% of the total food cost, and averaging 8.5%.

It is outrageous that the Administration would propose that this, the only source of federal food assistance to institutions, be dried up in the name of holding the reins on spending. The commodity distribution program for institutions is a comparatively small portion of the Food and Nutrition Service budget. The fewer the participants, of course, the less flak for the USDA, as Mr. Yeutter so cleverly recognized. When asked to comment on his January, 1974, memorandum to Secretary Butz, Yeutter told



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a reporter for the Community Nutrition Institute that no one would be hurt by the termination of this program whenever it might occur since USDA would "shift into an alternative system that would do the same thing or better". To date there has been NO WORD from the USDA about possible alternatives....unless the recently proposed zero appropriation is what the Department considers a viable alternative to the current $16.7 million program.



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## III.

## PROBLEMS FACING FOOD SERVICES

### Communities and States Shirk Supportive Roles

> November 7, 1974/AUGUSTA----The rise in food costs during the past year has caused critical situations in many of Maine's institutions and emergency funds will be asked of the new Legislature to bring the Department of Mental Health and Corrections "out of the hole".
>
> Commissioner William F. Kearns said that the funds allocated by the 106th in 1972 (for 1973) provided a fixed amount of money for foods based on food costs of that year, with little or no provisions for increases, and, in some institutions, decreases in the food budget....
>
> "We have instituted many changes in purchasing and feeding at all our institutions in an effort to hold the line", Kearns added, such as reduced portions, smaller size cookies and cakes, elimination of non-essential purchases..., cut down considerably on "seconds", and maintained rigorous rigid control and inspection of all feeding procedures.
>
> "We can't even project the amount that we will need," Kearns added, "since food costs are still climbing. We have a definite commitment to provide a satisfactory and healthy diet to all our clients, and we intend to keep that commitment," Kearns said, "but we are in trouble. This is the first time in six years that the Department has had to seek supplemental funds for foods."
>
> Press release from then
> Commissioner William F. Kearns,
> Department of Mental Health
> and Corrections
> State of Maine

The belief, rising out of turn-of-the-century zeal, that religious and charitable organizations can tend to the orphaned



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and ill among us is for all practical purposes a myth in the 1970's. Just as it is mythical to assume that because a child is a ward, he or she is adequately provided for by the state or county.

Currently, 64% of the residential child-caring institutions in this country are private; 36% are public. Of the responding institutions, the breakdown within public and private categories was as follows:

| Public 392 | | Private 665 | |
|---|---|---|---|
| Federal | 3% | Secular, non-profit | 62% |
| State | 62% | Religious | 36% |
| County/parish | 33% | Other | 2% |
| Municipal | 2% | | |
| | 100% | | 100% |

Private institutions traditionally looked to the community for support in feeding and clothing the children in their care. Costs were met through "charity" -- donations of clothing, money, and food from concerned community people; tithing of the church members; gifts of food from area farmers, grocers, and merchants; annual benefits and bazaars. Yet such assistance wanes in times like these when community people, faced with a spiraling economy, provide for their own families first. Now, churches rarely tithe for their charitable institutions; gifts of food and meals are drying up; attendance at charity bazaars and socials decreases annually; United Funds, by increasing recipients on



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their lists, decrease the amount given to each. An example is the Good Shepherd Home in Hot Springs, Arkansas, cut by the local United Fund from $5,000 to $2,000 in 1974.

Those institutions which rely on state and county support are in the same desperate straits; in some ways their situation is more critical. Since the majority of children in public institutions are delinquent or severely retarded, few people generate the concern for them that they do for the orphaned and neglected majority in private care.

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"Rapidly increasing food prices have pinched the food budget here significantly. Between the loss of surplus commodities and price increases, our food expenditures so far this year have increased approximately 35%. We have reduced the amount of food prepared, eliminated meals eaten by employees both for which they paid a set fee and for "training meals" where staff ate with residents as training models. We have reduced the amount of food prepared based on estimates of garbage waste and have revised meal menus to get the most nutritious value for the least cost.

We have appealed to the state officials that control extra food allotments, and were turned down for a supplementary appropriation for food. As it appears now, we will be expending funds for food that would have supported other activities such as: workshops, meetings and conferences for staff development; extra clothing to replace lost or damaged clothing items; and a number of expenditures that ordinarily would have supported programming for our severely handicapped population.

In addition to the immediate problems caused by the cost increases, the legislature has mandated that food be a line item budget. Part of the motivation

for this request is that populations in the institutions in the state have decreased markedly without a similar decrease in food costs. However, we have increased the amount spent per resident per day for food from approximately 75¢ about three years ago, to a current daily cost of about $1.40 for raw food. We have supplemented three meals a day with snacks but have decreased the choices recently so that the more expensive items are no longer available."

Superintendent
Public Facility for the
Mentally Retarded
Pownal, Maine

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The letter from Maine echoed the sentiments expressed in a memo posted during the summer at the Arkansas Training School For Girls at Alexander:

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TO: Staff and Student Personnel
FROM: Chester Cornell, Superintendent
SUBJECT: Food Conversation

The cost of food has soared in the recent past and it appears it will continue to do so. The drastic increase in costs were not funded by the state and conservative measures must be instituted.

Effective Immediately: everyone eating in the kitchen will be expected to eat all edible food on their trays. The cooks will place only food items in the amount requested on each tray. Portions will be reduced, but seconds may be obtained.

Milk will be given only in the amounts requested. Example: one-half or one glass. Refill of milk as requested will be available.

...Whenever possible, the kitchen personnel will be notified ahead of time when guests are expected, so that an adequate amount of food can be prepared.

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Since community contributions and state support are insufficient, institutions have met food costs in a number of ways, some of them bizarre to the casual observer.[5] Larger institutions have begun to buy wholesale in bulk; smaller ones consolidate with others so that as a group they can take advantage of wholesale prices. In Guilford County, North Carolina, the county farm garden supplies enough pork, beef, vegetables, and fruits to defray food costs at the detention home, the home for mentally retarded across the street and the county farm down the road. In Alaska and Washington, Game and Wildlife wardens "donate" all moose and fish confiscated from poachers to institutions. In Texas, community-minded cattlemen in the North Central area donated their livestock to institutions instead of shooting them last year to protest market prices. Other market-harried Texas cattlemen ask $200 and then allowed institution directors to enter the pasture and shoot the cow of their choosing to haul away for food. Hunting camps are becoming popular in rural western areas in which youngsters from area children's homes are taught to handle a gun and are taken out during the season for a weekend. Whatever they kill is taken to their institution for food. In South Carolina, one director depends on "nothing save the will of the Lord" to provide his wards with adequate food. "We all pray for food at the table and then I get in the truck and drive around. People fill up the truck in the name of the Lord. It hasn't failed yet," he told The Children's Foundation.

Despite it all, no amount of resourcefulness can compensate for the ever-increasing food problems now facing institutions. Since January, 1975, food costs have risen 24% and are expected to rise another 15% before December.

When a child who is a ward of the state is placed in residential care, the state in theory assumes financial responsibility for the child. Yet the most common problem in meeting higher food costs has been the recalcitrance on the part of the state to assume full -- and not merely partial -- payment for the cost of care. Group home counselors in District of Columbia group homes have paid from their own pockets when the notoriously sluggish Department of Human Resources has taken several months to process cost-of-care contracts. The director of a Georgia home for children writes that "while we serve the children of the state, and more than half of ours are referred to us by Georgia Family and Children Services, the state is not able to pay much more than half of the total cost of their care. In many cases, we receive much less than even half...."

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"Reimbursement from the state is based on 'Per Capita Expenditures' per agency. If you spend much, you get a higher rate. [We are] allowed for 1974 for food costs $37.81 per child per month, and our costs are averaging for 1974 $49.00 per child per month. The second quarter of 1974 will reflect a much higher food cost as we have noticed at least a 10% mark-up alone in many items."

Director, Home for Children
Seattle, Washington

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As long as states and counties remain insensitive to the cost of providing ample care for their wards, institutionalized children will continue to be fed but not fed well.

## Food Costs More Than Budgets Allow

"Help", noted one respondent in the cost portion of The Children's Foundation survey, and he meant it. In many facilities food costs are the second highest budget item, behind salaries. Nearly every facility visited by The Children's Foundation rated food costs as rising faster than any other budget item, having increased by more than thirty percent since 1972.

Food costs have unfortunately exceeded amounts allocated to institutions by their funding source. Using figures from our survey, we determined that, averaged, the actual amount spent on food was $0.24 per day higher than the budgeted amount.

| Meal | Actual Cost Per Child Per Day | Budgeted Cost Per Child Per Day |
|---|---|---|
| Breakfast | $0.57 | $0.54 |
| Lunch | 0.71 | 0.64 |
| Dinner | 0.94 | 0.78 |
| Snack(s) | 0.31 | 0.26 |
| Total | $2.53 | $2.22 |
| Average total[6] | $2.12 | $1.88 |

In an institution serving 50 children, $0.24 per child per day represents $360 per month, or $4,320 per year -- a figure few institutions are capable of absorbing.



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Although the question was subjective and not statistically valid, The Children's Foundation asked what respondents considered an "ideal" amount to spend on meals per child per day. Their responses, averaged, were $0.58 more than the budgeted amount.

## Distinctions in Present Federal Food Programs Cuts Maximum Participation

Only in isolated instances may children in residential care take advantage of programs under the National School Lunch and Child Nutrition Acts. Usually they must go outside their facility to participate -- to a community school or day care center -- because the population of residential institutions as an entity, i.e., the institution itself, has been specifically excluded by definitions and exclusionary regulations. For instance, the Special Food Service Program (section 13) defines an eligible institution as "a private, nonprofit institution or a public institution...which provides day care or other child care where children are not maintained in residence...The term 'service institution' includes a school or other private, nonprofit institution or public institution that develops a special summer program, and includes a private, nonprofit institution or a public institution providing day care services for handicapped children."

The only residential institutions eligible to participate



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in the SFSP known to us are those which operate a day care center for handicapped children on the grounds.

Regulations governing the school lunch program are another stumbling block. Although a child-care institution is compelled by state compulsory attendance laws (except in Mississippi) to provide accredited schooling for their children, particularly in detention and correctional facilities, they are NOT by definition eligible as schools for participation in the National School Lunch Program.

Of the 69,171 children currently in responding facilities, 51,463 of them attend classes.Yet only 18,773 (36%) eat free lunches at school. This is due in part to USDA guidelines such as this:

> Public and private nonprofit institutions with their own schools or public and nonprofit private schools attended by institutionalized children, may claim special assistance on meals served to such institutionalized children if the following conditions are met: (1) the institution requires or expects the family to provide funds for the support of the child, and (2) the family meets the approved family-size income criteria for free and reduced price meals.
>
> If, on the other hand, the institution does not require or expect the family to provide funds for the support of the child, the institution or the school attended by the child may claim only Section 4 on lunches served to that child, and "all breakfast" reimbursement on breakfasts served to that child.

Then states interpret differently the USDA regulations concerning recipients of school food services. USDA defines a



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school as "an educational unit of high school grade or under, operating under public or non-profit private ownership". California interprets this to mean that any institution which operates a school on its grounds is entitled to school food services for children attending the school. This is the broadest interpretation. Most states grant school status to institutions that operate primarily as schools. By changing their names from "State Schools" to take advantage of Law Enforcement Agency Administration (LEAA) rehabilitation funds, many youth correctional facilities found themselves primarily correctional and thus ineligible for the school foods they had served for years. A juvenile detention center in southern Louisiana receives the full range of commodities allowed a "commodity only" school because, as the director of food services told The Foundation, "those children go to our public or parochial schools. If they get in trouble they are the same school children. Why shouldn't they get the same food?"

In some states, the legislature has further restricted USDA regulations. Washington law, for instance, permits the State Department of Education to administer school food services only in public schools. This law has forced institutions with schools and private schools to apply directly to the USDA regional office. USDA is none too pleased with the extra work load and does not advertise the possibility.



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One sympathetic USDA official in San Francisco told The Foundation it is often the attitudes of the state school lunch director which determine what type of facilities are eligible. And popularity and sympathy should never be determinants.

Even participation of institutions in the only federal food program designed for them is subject to restrictive and exclusionary regulations and state interpretations. Food distribution agencies in Montana, Alabama, and Arizona, among other states, will not recognize as an "institution" any facility in which less than 15 children reside, thereby excluding a a number of group homes from the commodity distribution to institutions program.

States like Kentucky and West Virginia completely discontinued their deliveries to residential facilities in remote counties, responding to the clear message from USDA that commodity distribution was on its way out. The supervisor of a detention facility in Appalachia (Kentucky) pointed out that "when they gave food stamps to the needy families [here], the county discontinued the commodity program for <u>everyone</u>. Now the institution gets none."

The end of commodity distribution to "needy families" has meant that a number of participating institutions no longer "receive their due" because counties/states -- in a reaction to



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clear USDA policy during FY 1975 -- began closing down warehouses and cutting back distribution points. No commodities are distributed in Kansas. In 1969-1970, there were roughly 60 warehouses maintained at county expense, through which commodities for needy families in the 81 Georgia counties were channeled. For years, the commodities earmarked for institutions were also handled through these warehouses. Now, with the end of the family commodity program and no state appropriations for intrastate transportation of commodities to institutions, Georgia facilities must rely on only three freight yard stops quarterly.

Finally, it is of interest that USDA "has excercised administrative latitude in expressing priorities among commodity recipients. Preference is given to families, schools, and other child nutrition programs over institutions."[7]

Conclusion

The proposed end of the commodity distribution to institutions program, rising food costs, declining community donations, state and county reluctance to provide ample, flexible cost of care for wards, definitions and regulations of federal food programs designed to minimize participation of institutions and the children inside -- circumstances beyond the power of the 400,000 institutionalized children in America to combat. But who will help as their food services decline?



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Whose children are they? Whose concern is it that they eat well? Their parents are often dead, don't care, or are afraid to cause a stir lest the child be removed from needed care. Community people donate a few dollars and a Christmas turkey but do not want to get involved. Facility staff are generally overworked and underpaid and lack the time and the expertise to act politically on behalf of children in their care. Politicians haven't been aware of their needs.

It is a societal responsibility to ensure that institutionalized children receive a balanced diet, one necessary to physical and emotional well-being -- one as ample as that of other American children. Should institutions be forced to carve out decent, nutritious meals under prevailing economic circumstances with no federal food assistance, they will fail and their children will suffer.



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IV.

RECOMMENDATIONS

A. National Project Recommendations

CHILDREN IN RESIDENTIAL CARE SHOULD BE PROTECTED UNDER THE NATIONAL SCHOOL LUNCH AND CHILD NUTRITION ACTS.

Federal food assistance benefits should be made available to institutionalized children just as they are to school children and pre-school children. Whether a new program be designed or whether full participation under an existing program be allowed, something must be done to assure a basic level of nutrition for the nation's forgotten children in residential facilities. The children need it and justice requires it.

IF LEGISLATION SHOULD PASS INCLUDING CHILDREN'S RESIDENTIAL INSTITUTIONS UNDER THE NATIONAL SCHOOL LUNCH AND CHILD NUTRITION ACTS, STATES SHOULD BE REQUIRED TO MAINTAIN THE FULL AMOUNT OF CASH ASSISTANCE THEY CURRENTLY PROVIDE TO THESE INSTITUTIONS.

In order to pay rising food costs, children's residential institutions have been forced to freeze hiring and services provided to institutionalized children. Federal food assistance would in all likelihood only support a portion of food program costs, but that portion should be used to free funds for other food program needs.

APPROPRIATIONS FOR FISCAL YEAR 1976 SHOULD BE INCREASED BY 10% OVER THE $16.7 MILLION APPROPRIATION LAST YEAR FOR COMMODITY DISTRIBUTION TO INSTITUTIONS.



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The Administration has proposed that commodity distribution to institutions not be appropriated in FY 1976, marking the end of the only federal food assistance available to "charitable institutions", as such. Although institutions have no legal right to a continued program, reasonable expectancy prevails after forty years. Yet in the last few years appropriations have steadily declined and with the funds, quality and quantity of donated foods as well. There was talk at the USDA about a cash alternative for institutions, but such a program was never designed. Judging by past USDA interest in the programs, institutions dare not expect any alternative.

The Children's Foundation survey shows that a ten percent increase over the FY 1975 figure of $16.7 million -- or $18.4 million -- is a needed minimum increase for FY 1976. A return to traditional levels of commodities to institutions should be assured as well.

If children in residential care are included in the wider range of child nutrition programs, then a portion of the $18.4 million -- proportionate to the number of children eligible in child-care institutions -- should be reassigned for purchase of commodities under the appropriate program.

THE DEPARTMENT OF AGRICULTURE SHOULD MODIFY ITS PRESENT INTERPRETATION OF THE LAWS GOVERNING COMMODITY ASSISTANCE TO INSTITUTIONS TO CORRECT THE "HAND-ME-DOWN" AND "CATCH-AS-CATCH-CAN" CHARACTERISTICS OF THE PROGRAM.

The existing laws governing the program specify that institutions may not use donated commodities to supplement regular cash expenditures for food -- a kind of maintenance of effort requirement. The Department of Agriculture, on the other hand, has taken this to mean that institutions have no right to anticipate regular commodity donations or even be alerted in advance as to what types or quantities they will receive. Surely the Congress did not intend to create such a strong disincentive to proper meal planning and intelligent utilization of the commodities. Many of the serious problems connected with the distribution of commodities would be resolved if the Department of Agriculture were to consider residential institutions as legitimate regular clients and not as dumping grounds for excess stocks.

THE DEPARTMENT OF AGRICULTURE SHOULD MODIFY POLICY WHICH PROHIBITS INSTITUTIONS WITH A USDA SUPPORTED SCHOOL FOOD PROGRAM FROM RECEIVING REGULAR INSTITUTION COMMODITIES FOR DINNER, WEEKEND AND SUMMER MEALS.

There is no reason for this discriminatory restriction on institutions with school food programs. Surely, local Distribution Agencies, the USDA, and institution staff can devise procedures whereby quantities of commodities can be prorated and inventories kept separate should institutions receive both commodity packages. No facility should be punished with a loss of commodities simply because it takes advantage of the National School Lunch and Breakfast program.

THE DEPARTMENT OF AGRICULTURE SHOULD IMMEDIATELY REVIEW ITS ELIGIBILITY POLICIES TO INCLUDE CERTAIN RESIDENTIAL FACILITIES FOR SUCH USDA PROGRAMS AS WIC AND THE COMMODITY SUPPLEMENTAL FOOD.

The ineligibility of women in public non-profit maternity homes for WIC (Special supplemental food program for Women, Infants and Children) or Supplemental Foods seems patently unjust. Certainly, in the case of Supplemental Foods, nothing would prevent the facility itself from playing the role of program sponsor and distributing the foodstuffs in conjunction with a special diet program for pregnant women residents. Provided an agreement could be worked out with a local health clinic, the same arrangement should work for homes wishing to sponsor the WIC program.

THE DEPARTMENT OF AGRICULTURE SHOULD PROVIDE OUTREACH SERVICES AND EXPLANATIONS OF ALL FEDERAL FOOD ASSISTANCE PROGRAMS TO ADMINISTRATORS OF RESIDENTIAL CHILD-CARE INSTITUTIONS.

Through the survey and visits, The Children's Foundation discovered a tremendous lack of knowledge about existing federal food assistance programs. If directors had heard of the programs, they did not know who administrated them locally, to whom to apply, and what portions of their institutionalized population might be eligible. A web of exclusionary regulations has kept institution participation in most child nutrition programs at a minimum; nationwide only 71% of the eligible institutions participate in the commodity distribution to institutions program.



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Only through a flow of information and open communication between the USDA and institutions can full knowledge and consequently full participation be realized. To date, the commodity distribution program is the most widely advertised program. More likely than not, the reason is that it has been as much a benefit to the agricultural economy as to the recipients.

NATIONAL NUTRITION STANDARDS SHOULD BE DEVELOPED BY THE DEPARTMENT OF AGRICULTURE AS A PREREQUISITE TO PARTICIPATION IN ANY FEDERAL FOOD PROGRAM FOR CHILDREN IN RESIDENTIAL CARE, JUST AS A TYPE A MEAL PROTECTS THE NUTRITIONAL WELL-BEING OF THE SCHOOL CHILD.

The Secretary of Agriculture should establish a Commission to design nutrition standards as soon as possible. Such standards should be binding on any residential child-care institution participating in any federal food assistance program.

CHILDREN IN RESIDENTIAL CARE WHO ATTEND COMMUNITY SCHOOLS SHOULD, UNDER NO CIRCUMSTANCES, BE SINGLED OUT AS RECIPIENTS OF FREE OR REDUCED PRICE LUNCHES.

According to federal legislation, no child who receives free or reduced price meals can be singled out and identified as needy. Yet from Colorado to Alabama we have encountered violations, most notably the use of "free lunch tickets". The USDA should take immediate action against schools which insist upon singling out institutionalized and other needy children.



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B. Recommendations from Texas Project Conference

EXISTING CHILD NUTRITION LEGISLATION SHOULD BE EXPANDED TO INCLUDE THE CHILDREN OF RESIDENTIAL FACILITIES IN SOME FORM OF COMPREHENSIVE USDA FOOD ASSISTANCE PROGRAM MODELED AFTER CURRENT CASH AND COMMODITY SUPPORT PROGRAMS FOR DAY INSTITUTIONS. THE PROGRAM SHOULD PROVIDE REIMBURSEMENTS FOR THREE MEALS A DAY, PLUS A SNACK, SEVEN DAYS A WEEK YEAR ROUND. EQUIPMENT MONEY SHOULD BE MADE AVAILABLE FOR KITCHEN EXPANSIONS OR RENOVATIONS.

Children in residential institutions are the only category of children not potentially eligible for one of USDA's comprehensive child nutrition programs. Commodity distribution, while it provides some assistance and could be substantially improved, is not a viable substitute, even if its legislative future were assured and USDA agreed to embrace it enthusiastically. Existing food assistance programs might relieve some of the strain on institution food budgets if fuller participation could be achieved but, as presently structured by legislation and regulation, none address the needs of institutions directly.

WHERE THE DEPARTMENT OF PUBLIC WELFARE PROVIDES A PER CHILD PAYMENT TO TEXAS FACILITIES FOR RESIDENTIAL CARE, THAT PAYMENT SHOULD REFLECT THE FULL AND CURRENT COSTS OF FEEDING THE CHILD.

In almost every facility surveyed, per child food expenditures had far exceeded Department allowances. The $2.50 per day per child allotment is barely adequate to cover the food much less the child's total needs. The children must tighten their belts -- cut out snacks, reduce second helpings, and eat



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less.

In principle, for each standard payment DPW should renegotiate the payment quarterly so that the food portion adequately reflects the change in food service costs.

THE DEPARTMENT OF PUBLIC WELFARE SHOULD DEVELOP AND MAKE KNOWN THE CONSULTATIVE SERVICES OF STATE NUTRITIONISTS THEY HAVE ASSURED RESEARCHERS ARE AVAILABLE.

Spokespeople at Department of Public Welfare have commented many times that they are prepared to provide nutrition consultative resources to facilities upon request. However, not one of the facilities contracted knew of such resources nor were they confident that DPW had registered nutritionists on staff.

DPW should advertise the availability of consultants knowledgeable in the areas of food purchasing, food services management, nutrition, and meal planning. Further, this service should be on-going and not just available in an emergency situation.

ALL FACILITIES SHOULD STRIVE TO IMPROVE AND UPDATE DOCUMENTATION ON THE FLOW OF MONIES THROUGH THEIR PROGRAMS.

It is becoming critical that financial information be easily retrieved and reported on children's services in Texas. It has never been required that these records be kept.

As long as such information remains nebulous and difficult to recover, demonstration of cost-of-care and evaluation of services will prove difficult and financing will be based on



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guesswork rather than fact.

EVERY EFFORT SHOULD BE MADE TO INCREASE THE NUTRITIONAL AWARENESS OF THOSE WHO ACTUALLY PREPARE MEALS.

Although menu planning is based on recommended nutritional guidelines, the manner in which an item is prepared actually determines its nutritional value. Both the Department of Public Welfare, through its consultative resources, and the agencies themselves should focus on increasing the knowledge and awareness of cooks in preparing nutritionally sound meals.



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C. Recommendations from District of Columbia Project Conference

EXISTING CHILD NUTRITION LEGISLATION SHOULD BE EXPANDED TO INCLUDE THE CHILDREN OF RESIDENTIAL FACILITIES IN SOME FORM OF COMPREHENSIVE USDA FOOD ASSISTANCE PROGRAM MODELED AFTER CURRENT CASH AND COMMODITY SUPPORT PROGRAM FOR DAY INSTITUTIONS. THE PROGRAM SHOULD PROVIDE REIMBURSEMENTS FOR THREE MEALS A DAY, PLUS A SNACK, SEVEN DAYS A WEEK YEAR ROUND. EQUIPMENT MONEY SHOULD BE MADE AVAILABLE FOR KITCHEN EXPANSIONS OR RENOVATIONS.

Children in residential institutions are the only category of children not potentially eligible for one of USDA's comprehensive child nutrition programs. Commodity distribution, while it provides some assistance and could be substantially improved, is not a viable substitute, even if its legislative future were assured and USDA agreed to embrace it enthusiastically. Existing food assistance programs might relieve some of the strain on institution food budgets if fuller participation could be achieved but, as presently structured by legislation and regulation, none address the needs of institutions directly.

WHERE THE DISTRICT OF COLUMBIA PROVIDES A PER CHILD PAYMENT TO DISTRICT FACILITIES FOR RESIDENTIAL CARE, THAT PAYMENT SHOULD BE RENEGOTIATED QUARTERLY, REFLECTING THE FULL AND CURRENT COST OF FEEDING THE CHILD.

In almost every facility surveyed, per child food expenditures had far exceeded DHR allowances.

In principal for each standard payment DHR should renegotiate the payment quarterly so that the food portion adequately reflects



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the change in food service costs. The $12 increase for food this year, from $50 to $62, hardly reflects the tremendous food cost spiral.

COMPREHENSIVE NUTRITION STANDARDS SHOULD BE INCORPORATED IN ANY CHILD CARE PLAN APPROVED BY THE DISTRICT OF COLUMBIA CITY COUNCIL.

The DHR proposed "Comprehensive Child Care Plan" contains no section specifically addressed to nutrition, no mention of food service guidelines and/or regulations for residential facilities, and only passing reference to general food service.

The Children's Foundation considers this omission inexcusable.

Recognizing that most staff of District residential child-caring institutions have the best of intentions in planning and preparing meals for their children, we nevertheless know that an absence of nutrition standards can be an avenue for abuse. As guardians for the majority of children in its institutions, the District has the moral responsibility to set down within the proposed Plan detailed standards which will assure that these children are fed properly.

The Foundation further recognizes there are food service situations unique to residential child-caring facilities in the District and that, therefore, nutrition standards for these facilities should be developed as separate from any designed



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for day care centers or other child-caring facilities included in the Comprehensive Plan.

Finally nutrition standards should be a qualification for licensing of any residential facility, including those under the auspices of the District of Columbia.

THE DISTRICT OF COLUMBIA SCHOOL FOOD SERVICE OFFICE AND THE USDA SHOULD BOTH REVIEW THEIR PROCEDURAL REQUIREMENTS FOR PARTICIPATION IN SCHOOL LUNCH AND BREAKFAST TO CORRECT REQUIREMENTS WHICH MAY BE OBSTACLES FOR SCHOOLS ON THE GROUNDS OF RESIDENTIAL INSTITUTIONS.

A substantial number of District facilities either decline to participate in the school food program or have serious complaints about it, based on the sheer volume of paperwork required. Specific complaints have also been leveled at such things as requirements for kitchen equipment. Both the District and the USDA should recognize that the small specialized schools on the grounds of residential facilities have a unique set of needs and problems for which some allowances must be made.

ALL LEGITIMATE PUBLIC AND PRIVATE LICENSED NONPROFIT INSTITUTIONS IN THE DISTRICT SHOULD BE ALLOWED TO MAKE USE OF THE SCHOOL SYSTEM'S WHOLESALE BUYING OPERATION.

Only a few of the District's largest residential institutions are able to use wholesale markets to supply their kitchens. Participation in a wholesale buying operation as large as that operated for District schools would result in substantial savings to institutions.

THE DISTRICT'S DEPARTMENT OF HUMAN RESOURCES SHOULD DEVELOP STANDARD PROCEDURES TO MEET THE EMERGENCY FOOD SERVICE NEEDS OF TEMPORARY SHELTERS.

The food service problems common to all the District's temporary shelters should be tackled through a common strategy which is fair to the clients, the counselors and to DHR. We suggest, as one alternative, that DHR provide each such facility with a revolving emergency food fund, which would operate much like a petty cash fund and which could be used either to stock an emergency food cupboard or pay for emergency meals outside the facility.

THE DISTRICT'S SCHOOL FOOD SERVICE BRANCH SHOULD UNDERTAKE AN EXTENSIVE OUTREACH AND TECHNICAL ASSISTANCE PROGRAM TO HELP DISTRICT INSTITUTIONS MAKE BETTER USE OF THE COMMODITY DISTRIBUTION PROGRAMS AND TO ASSIST THEM IN APPLYING FOR WHATEVER OTHER FOOD ASSISTANCE PROGRAMS FOR WHICH THEY MAY BE ELIGIBLE. THE APPOINTMENT OF A SPECIAL LIAISON OFFICER WHOSE SOLE DUTY IS TO MAINTAIN REGULAR CONTACT WITH THE INSTITUTIONS SHOULD BE CONSIDERED.

Throughout the survey of District institutions, the communications problem was a common and recurring theme. Institution personnel were unfamiliar with the rules and regulations governing the various USDA food assistance programs, including the Commodity Distribution Program. Attempts to get straightforward answers or resolve problems met with unexcusable confusion and delay. At the very least, the Food Service Division should regularly inform the institutions about what the current commodity package contains and provide them with an opportunity to express their preferences.



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## FOOTNOTES

[1] All figures used in this report are based on the responses to this survey. For an explanation of methodology, see Appendix A. The survey form itself can be requested from The Children's Foundation for review.

[2] "Survey of Food Distribution to Institutions, 1972"; USDA FNS-107.

[3] Bulgar, butter, cornmeal, flour, grits, lentils, non-fat dry milk, rolled oats, peanuts and peanut products (e.g., peanut butter), dry split peas, rice, salad oil, shortening and rolled wheat.

[4] Commodities to institutions is indeed, a small program in the total Food and Nutrition Service budget; however, should commodities be axed, 1.3 million institutionalized Americans will no longer receive federal food assistance. Of the 1.3 million participants, 240,000 are in child-caring facilities; another 220,000 are children in facilities not specified as child-caring; 150,000 are old people in homes for the elderly; 210,000 are men and women in corrections; and over 430,000 are people in medical facilities.

[5] For sources of other donations available to some facilities, see page 12.

[6] For an explanation of the difference between these two total figures, see pages 10 and 11. In the text, the "average total" is used since it better reflects the total number of respondents.

[7] "Survey of Food Distribution to Institutions, 1972"; USDA FNS-107. (p. 12)



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APPENDIX A

METHODOLOGY

## DEFINING THE UNIVERSE OF RESIDENTIAL CHILD CARE INSTITUTIONS

The initial four months of the project were spent in compiling a national master list of residential child-caring institutions to receive mailed survey questionnaires. Names and addresses of facilities were collected from appropriate state agencies as well as from the published and unpublished national directories of child care associations. With the exception of Rhode Island, all 50 states, the District of Columbia, Puerto Rico, Guam and the Virgin Islands cooperated by providing the project with current and complete lists of licensed "children's residential institutions" as they defined them. These lists were collected and cross-checked with the following 16 national sources:

- The Child Welfare League of America Directory of Member Agencies, 1974;
- The American Hospital Association, a special computer print-out of all long-term hospitals for children, 1974;
- The National Youth Alternatives Directory of Runaway Centers, January, 1974, and the supplemental update, August, 1974;
- The Directory of Halfway Houses and Group Homes for Troubled Children, published by the State of Florida;
- Directory of the International Halfway House Association, 1974;
- The United States Department of Health, Education and Welfare Directory of State and Local Resources for the Mentally Retarded, 1970;
- The National Council on Illegitimacy Directory of Maternity Homes and Residential Homes for Unmarried Mothers, 1966;
- The Porter Sargent Directory for Exceptional Children, (7th Edition) 1972;



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- The United States Department of Health, Education and Welfare Directory of Facilities Providing Special Education in the United States, Vols. 1 & 2, June, 1973;
- The Episcopal Church Annual, 1972;
- The American Correctional Association Directory of Juvenile and Adult Correctional Institutions and Agencies, 1973;
- The Lutheran Council, U.S.A., listing of facilities operating under the auspices of the Lutheran Church;
- The Florence Crittenton Association of America listing of the Florence Crittenton Homes for Unwed Mothers, 1974;
- The Salvation Army listing of facilities operating under the auspices of the Salvation Army, 1974;
- Directory of Catholic Institutions in the United States;
- The University of Chicago, Center for Urban Studies, a computer printout of institutions surveyed, 1966.

Whenever obtainable, city and state directories of welfare resources were checked against the directories and the state lists. Both the nature of state lists and the project's very specific concern with federal food assistance tended to narrow the definition of the universe of institutions to be surveyed. Excluded were:

A. Unlicensed institutions: With the exception of Mississippi, no state was able to supply information on unlicensed institutions and none, except those in Mississippi, were included in the master mailing list. The decision not to seek out unlicensed facilities by other means, however, was made principally because licensing was assumed to be an important aspect in eligibility criteria for any future federal food assistance program which the Foundation might recommend as a result of the survey.

B. Private proprietary institutions: Though most state lists contained some proprietary (profit-making) facilities, these were excluded from the master list wherever they could be identified. It was assumed that only public and private non-profit institutions would be made eligible for future food assistance programs.

C. Foster homes: As a general rule foster homes were excluded from the survey; group homes (and other small facilities administratively more complex than a simple foster home) were included. However, the master list contained some inconsistencies resulting from differing state definitions and licensing practices. Identical facilities might be listed in one state as a group home, in another as a foster home and in a third not licensed at all and therefore not included in the state listing. Current trends away from institutionalized care to small group settings have tended to blur these distinctions.

D. Mixed facilities: A number of institutions serve a mixed population of children and adults. Facilities were included in the survey only if children were housed in a separate unit or annex and/or if 60% or more of the total residents were children.

E. Miscellaneous categories: Since children in boarding schools and residential summer camps are not institutionalized in the same sense as those in other facilities included in the survey, these facilities were excluded. Summer camps of limited duration for low-income children are included in proposed legislation under the Summer Food Program. The 78 BIA boarding schools were initially considered for inclusion but rejected because of the existence of federal food program support through BIA. Infant care and the infant portions of maternity facilities were excluded because of the difficulty in comparing costs of unique infant feeding arrangements with standard per meal expenditures.

After excluding the above categories, the total number of institutions placed on the master mailing list came to 4,239. Contained on the list were institutions for:

- dependent and neglected children
- predelinquent or deliquent children
- unmarried mothers
- mentally retarded children
- emotionally disturbed children
- physically handicapped children
- children in detention facilities
- children in temporary shelters, and
- children in hospitals for the chronically ill.



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Because of the time span involved in compiling the list, some additional discrepancies may have occurred, and a few institutions may have closed or new ones opened during the six months (between December 1973 and June, 1974) spent compiling the master list and designing the questionnaire. Of course, adjustments were made wherever possible. The project staff estimates that the master mailing list as of June, 1974, represented over 95% of the total universe of residential child-care facilities as defined above. It is the only up-dated complete list of its type currently available.

## CHARACTERISTICS OF THE SAMPLE

A survey questionnaire was mailed in June, 1974, to each of the 4,239 facilities on the master list. By October 1,146 completed forms had been returned. Of this number, 89 were eliminated from the sample as being too incomplete to fully tabulate or as being outside the parameters established for the survey. For example, a number of proprietary facilities slipped through the initial screening and had to be eliminated from the final sample.

The 1,057 returned questionnaires accepted for data processing represented 27% of the master mailing list and can be assumed to represent at least 25% of the total universe of child care facilities as defined. By state, the rate of return ranged from 5% in Montana to 70% in the District of Columbia.



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Because of this high rate of return, conclusions based on the data can be accepted with substantial confidence, despite the various biases inherent in a mailed survey questionnaire. The sample can be considered representative of the universe in terms of both institution size and public/private categories.



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# THE CHILDREN'S FOUNDATION TEXAS PROJECT

# REPORT ON

# FOOD SERVICE PROGRAMS

# IN RESIDENTIAL CHILD-CARING INSTITUTIONS

Deborah Dawes
Texas Project Director

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January 25, 1975

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# I.

# FEDERAL FOOD ASSISTANCE IN RESIDENTIAL CHILD-CARE FACILITIES

> In my judgment, this entire program [commodity distribution program] is geared too much for schools. Certainly it should be directed for children--but all needy children, whether they be in shelters, orphanages, children's homes, etc. Our particular eligibility is very small because we are not a school. Ironic? Certainly, because we serve children to make them adjusted enough to go to school!
>
> Business Manager of a Home for Children

## An Overview

The above comment summarizes for many residential children's facilities in Texas the Department of Agriculture's response to the food needs of institutionalized children. While the USDA provides comprehensive food assistance programs to families, to mothers and infants as nutritional risk, to day care centers, head start programs, summer camps, and most notably to schools, few of these programs touch the children of residential child-care facilities, even tangentially.

The only USDA-sponsored food program open to the majority of residential facilities is the donated commodity or commodity distribution porgram (formerly the surplus commodity program). This program has traditionally supplied a limited range of basic foodstuffs, purchased by the USDA as part of its price support and surplus removal activities, to institutions, schools and other agencies as a supplement to their regular meal programs.

Even here, however, in the one food assistance program open to them, the residential facilities have been at the end of the line. The variety, quantity and quality of commodities received by the schools and other non-residential programs have always far exceeded what has been available to residential institutions. The institutions' share often represents the leftovers from other programs. Moreover, when commodities are not available, schools receive a "cash-in-lieu-of-commodities" grant. No similar compensation is provided to the residential institutions.

In contrast to children's non-residential institutions, such as schools and day care centers, participating in a USDA-sponsored per meal cash reimbursement program, residential facilities support their meal programs out of general support funds from a variety of state, federal and private sources. In many facilities food costs are the second highest budget item; in almost every facility food costs are rising faster than any other budget item, having increased by more than 30 percent since 1972. Most institutions also report that their funding sources have remained stagnant, owing to anti-inflation pressures on government spending and the shrinkage of private sources.

Institutions in Texas have responded to the squeeze on food program costs in a variety of ways. Many have reduced staff; others have shifted funds from rehabilitation programs; and



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others have simply cut back on the quantity or quality of foods served. A few have been able to pass on costs through increased fees to parents or government agencies contracting for care.

Whatever the responses, the children eventually bear the cost. If meal service deteriorates, they remain the captive consumers. Unlike other children, they cannot compensate with dinner at home, or pack their lunches, or pick up a snack at the local drug store, It is ironic, to say the least, that these children, who are most dependent upon institutions for their well-being, should stand at the end of the line for federal food assistance.

## II.

## CHILD NUTRITION PROGRAMS IN TEXAS INSTITUTIONS: A REPORT OF SURVEY FINDINGS

### Scope of the Survey Project

In light of increasing food costs and the Department of Agriculture's threat to abandon commodity distribution, The Children's Foundation undertook in November of 1973 a nationwide project to study the food needs and programs of residential child-caring facilities. Among the several locations targeted for intensive research and community involvement was in Texas, in a triangle formed by San Antonio, Austin, and Houston and Galveston. Financial support for this target project was provided by the Moody Foundation.



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The survey had three objectives:

1. To assess the impact of rising food costs generally on institution meal service;
2. To measure the importance of commodity distribution for the institutions' meal service, identify current problems with the commodity program and calculate the impact the end of the program would have; and
3. To determine the need for federal food assistance of a more comprehensive nature.

A questionnaire format was developed specifically for the Texas target project. The questionnaire corresponded to a national version which was mailed to over 4,200 residential children's facilities across the country. The Texas questionnaire was designed to be used as a tool to collect more detailed information on certain aspects of food service delivery in conjunction with interviews and visits made to the facilities. During visits to the facilities, personnel from all levels were eventually involved in the discussions--directors, counselors, dieticians and kitchen staff all discussed their food service problems and needs and their participation in the commodity food distribution program.

Of the approximately 110 child-caring agencies in the San Antonio, Houston-Galveston, Austin triangle a representative



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sample was selected for study purposes of thirty homes, primarily private non-profit institutions, listed in Appendix A. These homes have a combined capacity of 1,363 children, although approximately 900 were in residence at the time of the survey.

## An Overview of Texas Facilities and Their Food Service Programs

> Texas ranks first among states in cattle and oil and ranks in the top ten in industry and population; however, Texas is 47th in supplying child welfare services and 51st (behind Guam) in supplying basic human welfare services.
>
> Comment, January Conference, January, 1975

Within the past three years there have been drastic changes in Texas' child care services for all types, but most especially in institutional care. The Texas Youth Council, responsible for the care and treatment of all children adjudicated delinquent in Texas, lost a critical lawsuit and was mandated to close its institutions following much testimony on the outright abuse and mistreatment of its charges. Mental Health-Mental Retardation, which operates institutions for retarded and mentally disabled persons, was adjudged to be so below federal standards for care as to be of scandalous proportions. And the Department of Public Welfare, responsible for developing standards for, and the licensing of, child care facilities, was discovered to be so lax in its duties that children were actually dying from the mistreatment received from some of those facilities designated for their care.



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Following the disclosures of the ominous conditions in many Texas child care facilities and the public outrage and investigations which followed, DPW changed its practices radically. The "Minimum Standards for Child Caring Institutions" published by DPW, was revised and updated for the first time in many years. Licensing procedures were overhauled and enforced, several institutions were closed, and nearly all facilities became suspect--until demonstrated otherwise--as a result of conditions which had developed over the years. It was further disclosed that child care institutions had become big business in Texas and large numbers of out-of-state children were being housed in Texas for pure profit purposes.

In the "Interim on Child Caring in Texas," a report developed by the Committee on Human Resources of the House of Representatives of the Texas Legislature it was stated: "The Committee on Human Resources finds that problems in both public and private out-of-home child-caring in Texas are of crisis proportions."

These events affected the development of this study in several ways. One effect was that due to the absence of requirements for reporting accurately to any source on total financial data and other kinds of records, there was an absence of available information on costs in many cases to document the need the facilities were experiencing. A second effect was a high level of initial distrust regarding any survey or study, as many



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facilities felt that even though their program was sound, a witch hunt was in effect going on, given the expose atmosphere that had developed. And thirdly, there exists a high degree of confusion and unsettledness given the changing nature of Texas policies.

Further, the general atmosphere of Texas' politics and social climate must be taken into account. As one administrator described it, Texas lives in a feudal era, with fiefdoms and closely guarded territories. As a result, there is a great deal of pride in many areas in not having any dependence of any sort on state or federal monies.

Despite the above, there were many homes which responded favorably and eagerly to the survey. Generally speaking, the larger, church-supported and well endowed homes showed little desire for involvement. Many of these facilities are rural, own land, and have their own farms and herds to sustain them. On the whole, the smaller, urban agencies responded more positively and openly.

The types of, and quality of, food services varied throughout the target area. The majority of the facilities have a centralized kitchen service with an adjacent dining room where the residents eat their meals, generally served family or cafeteria style. None of the institutions had catered food



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services. Several institutions did not have cooks to prepare and serve some meals either on weekends or other times during the week. At these times frequently a meal would be prepared in advance and warmed by the houseparents or leftovers were provided.

Florence Crittenton Services, a home for unwed mothers, has three cooks on alternate days so that the girls get three meals a day at all times.

In the San Antonio Children's Center breakfast meals are not planned by the cook or served in the main cafeteria, but are prepared by the cottage parents. The kitchen supervisor stated that on weekends, leftovers that were frozen from the weekly meals are served by the cottage parents.

These two homes represent opposite ends of the scale of food services regarding the availability of a cook, the rest falling somewhere in between with the cooking being divided up between professional cooks and houseparents.

All the institutions contacted purchased their foods from wholesalers, although more than one person commented that if they had the time to keep track of sales in supermarkets they would be far better off as wholesale prices were not that much of a savings.



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Although all the homes planned their menus from the Daily Food Guide contained in the Department of Public Welfare's "Minimum Standards for Child-Caring Institutions," or a comparable guide, it was evident that the nutritional value of the food depended greatly on the skill and know-how of the cook who prepared the meal (not necessarily the same person who had planned it, as many homes had consulting dieticians or nutritionists who planned the meals). Basic training for cooks in nutrition would appear to be a major step in improving food for these children. The problem here is essentially financial. The average salary for cooks is about $370 a month, a figure which is not likely to attract the best trained personnel. For institutions already struggling with making ends meet as a result of rising costs financing the training of such persons becomes difficult indeed.

One other problem frequently mentioned was that of encouraging children to eat wholesome foods, as frequently children prefer starchy sweets to even appetizingly prepared vegetables and meat. Again, however, this could be partly solved by good nutritional know-how in the kitchen. For example, such "fun foods" as pancakes or cookies can actually be not only tasty but if prepared properly with whole wheat flour, non-fat dry milk, and eggs, be nutritious as well.



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## Food Costs for Institutions and the Impact of Reduced Commodities

Texas institutions are not reduced to feeding their children rice and skim milk by any means. But the cost of maintaining nutritious meals is taking a heavy toll, and some may find it a price too high to pay for continued existence. The average food cost increase experienced by these homes was over 20%. (See Table I.) This, coupled with the reduction of commodities to two items, butter and non-fat dry milk, has seriously affected many homes. Some, such as the Home of the Holy Infancy, have made emergency pleas to United Fund or to other funding sources. Although the Home of the Holy Infancy was successful in their request, such measures are purely stop-gap, and many foresee desperate circumstances. Table II illustrates in a sampling of homes how the food budget has increased in the overall budget.

It must be kept in mind that most of these children are being cared for with little or no assistance from the state. The Department of Public Welfare pays a maximum of $2.50 for normal care in both foster family and institutional settings for "Aid to Families with Dependent Children"--eligible children, and no state funds are available for children who are not eligibile for AFDC. Currently in Texas, then, homes must depend on their own resources for funding, and, for those with limited resources, on as much participation as is possible in federal programs.

TABLE I

FOOD COSTS FIGURES

| Facility | Food Costs 1974 | Food Costs 1973 | Percent Increase | Food as % of Total Budget ('74) |
|---|---|---|---|---|
| Florence Crittendon | 30,500.00 | -- | -- | 7.9 |
| Burnet-Bayland Home | 101,904.00 | 83,819.00 | 21.6 | 12.9 |
| Boys Harbor | 12,000.00 | 10,000.00 | 20 | 10.2 |
| Youth Services Bureau of YMCA | 9,000.00 | 8,000.00 | 12.5 | 6.6 |
| Depelchin Faith Home | 39,974.00 | 34,546.00 | 15.7 | 3.7 |
| St. Peter's-St. Joseph's Children's | 13,778.00 | 12,383.91 | 11.2 | -- |
| Halfway House of San Antonio | 30,153.00 | 22,783.00 | 32.3 | 18.5 |
| Buckner-Baptist Benevolences | 10,882.00 | 9,731.00 | 11.8 | 45.4* |
| San Antonio Children's Center | 19,300.00 | 16,000.00 | 20.6 | 2.7 |
| Children's Shelter | 16,000.00 | 16,000.00 | -- | 7 |
| Mission Road Foundation | 36,986.27 | 33,021.94 | 12 | -- |
| Texas Youth Ranch | 17,000.00 | 12,500.00 | 36 | 25.4 |
| Mary Lee Foundation | -- | 51,516.47 | -- | 11 |

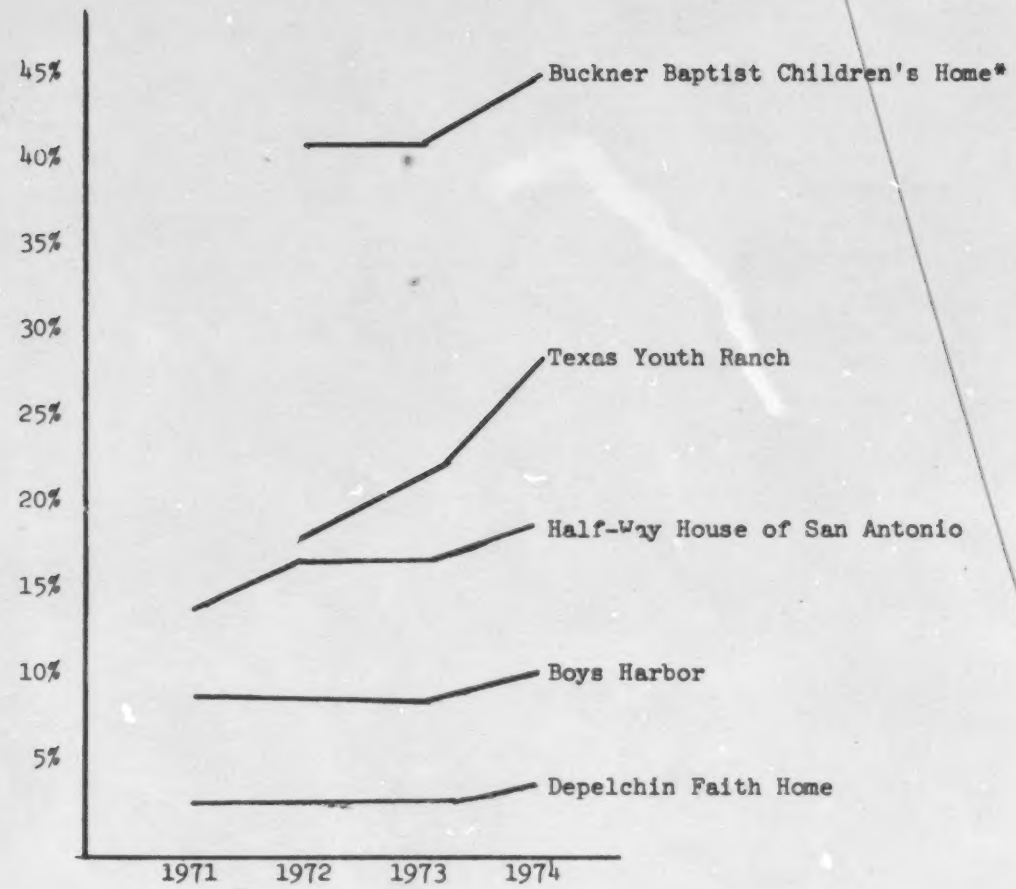
*Total budget for physical expenses.

NOTE: This chart does not reflect changes in the number of children in residence for which food costs were incurred. Thus, in several instances, the increase in food costs would be much higher had the population remained stable.

TABLE II

ANNUAL CHANGES IN THE PERCENTAGE FOOD REPRESENTED

IN TOTAL BUDGET IN A RANDOM SAMPLE OF CHILD-CARE FACILITIES




*Food as a percentage of total physical budget.



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Despite rising costs, over 57% of the institutions reported no flexibility in their budgets to allow for increases. As a result a variety of measure have been taken by these facilities. One measure is described in Table III; only 27% of the homes report no change in their menus. Fully 72% have had to alter and/or cut back on the amounts and types of foods served, primarily by increasing starches and reducing fresh vegetables and fruits.

> If this happens [loss of commodities], another area of our services to children will have to be reduced to help meet the increased cost of food goods.
>
> Administrator of a Home for Children

The above describes another measure undertaken by facilities to meet costs. Many reported reductions in recreational and programmatic services, including reduction of staff and the abandonment of plans for new services. Several institutions face closing down. Most others declare a determination to remain open but in many cases with reduced services. Children are not only receiving less quantity and quality foods, but are the victims of decreased overall care.

On the whole, the commodities distribution program was viewed very favorably by those participating in the program in terms of delivery, local service, and quality of food. A minority reported dissatisfaction with food quality and/or difficulty in obtaining foodstuffs (See Chapter III for problems



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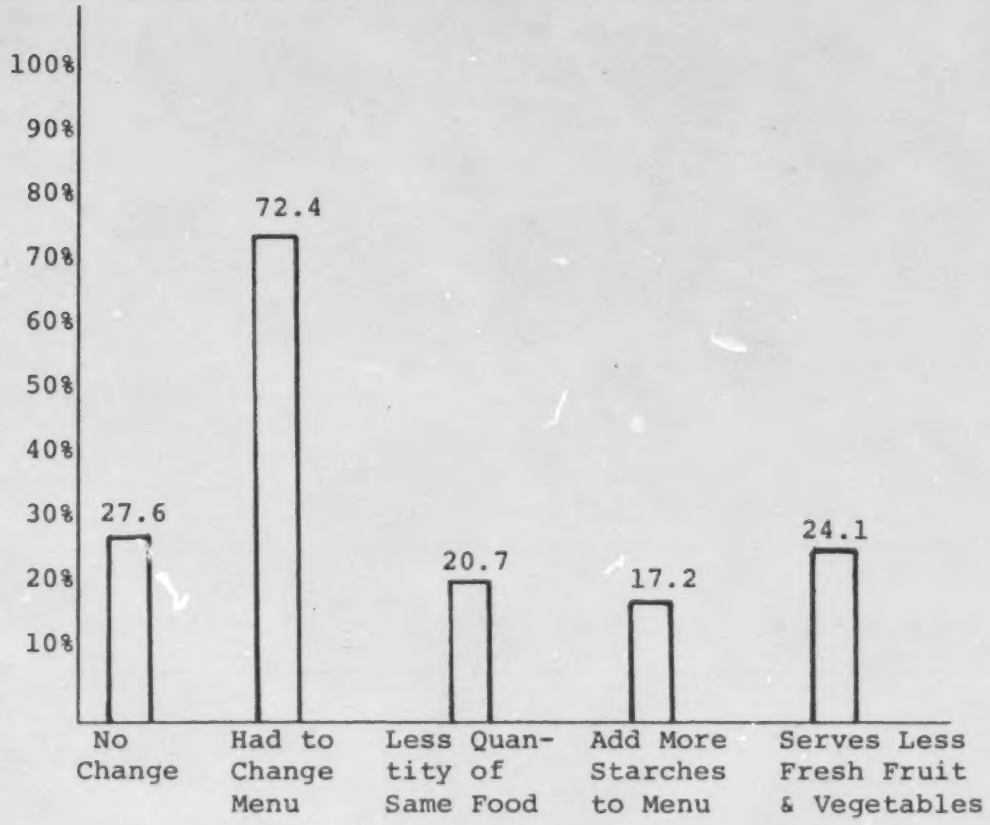
TABLE III

EFFECT OF RISING COST OF FOOD ON CHILDREN'S DIETS

IN TARGET AREA INSTITUTIONS*




*Not All Institutions Indicated the Kind of Change Made in Menus.



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expressed at the Texas Conference.). The majority felt that the only problem lay with the USDA's policies limiting their eligibility for certain items ("... to put it bluntly, we can have what nobody else wants..." Business Manager, State Home), not with the program as it was conducted in Texas. These people were hit quite hard by the further reduction of items to butter and non-fat dry milk:

> The commodity distribution program has been very good to us. Without them we could not feed the needy children that we serve. Financially we would be hurt very much.
>
> Business Manager for a Texas Institution

> I do not know if they will continue that [commodities] in 1975. We are United Fund supported and 1975 looks like a bleak year unless we get more commodities.
>
> Director of a Youth Home

> We have had no problems in ordering and receiving commodities. Due to the fact that we are a non-profit agency with many poverty level children in the program, it is essential we receive as much assistance as is available.
>
> Associate Administrator of a Texas Children's Center

Table IV illustrates the extent of commodity participation in the facilities (where available). It is evident that even as limited in their selection of food items as institutions were,



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TABLE IV

PARTICIPATION IN THE COMMODITY DISTRIBUTION PROGRAM

| Facility | Total Capacity | Children in Residence | 1973 % Total Budget Donated Commodities Represent |
|---|---|---|---|
| Houston: | | | |
| Florence Crittendon Home | 46 | 37 | -- |
| Burnet Bayland Home | 144 | 130 | 5 |
| Women's Christian Home | 18 | 18 | 2.9 |
| Boys Harbor | 64 | 60 | 5 |
| Lasker Home for Homeless Children | 25 | 23 | 4 |
| Youth Services Bureau (YWCA) | 19 | 5 | 0 |
| Depelchin Faith Home | 74 | 57 | 3 |
| Austin: | | | |
| Mary Lee Foundation | 85 | 66 | 5 |
| Settlement Club | 24 | 22 | 3 |
| Home of the Holy Infancy | 30 | 10 | 5.4 |
| Texas Youth Ranch | 16 | 15 | 0 |
| Central Texas Boys Ranch | 10 | 10 | 0 |
| San Antonio: | | | |
| Texas Cradle Society | n.a. | 18 | 10 |
| Mission Road Foundation Rehabilitation Center | 148 | 94 | 0 |
| Boysville | 96 | 72 | 10 |
| Halfway House of San Antonio | 40 | 10 | 5 |
| Buckner Baptist Benevolences | 21 | 15 | 3 |
| Mexican Baptist Children's Home | 144 | 85 | 8 |
| Methodist Mission Home | 120 | -- | 3 |
| San Antonio Children's Center | 36 | 32 | 3 |
| Children's Shelter | 42 | 42 | 10 |



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commodities played an important role in determining food expenses. The smaller facilities feel the food crunch the most as they are not able to purchase in bulk quantities because of limited storage space and the small number of children served.

To summarize, the combination of rising costs and the reduction of commodities spells trouble indeed for many Texas children. Despite the limited foods available, many homes depended on the program for implementation of their food services and have been struggling desperately to make ends meet. At a time when the improvement of services to children has become a nationwide concern, it is ironic indeed that so much critical attention and energy must be focused on such a primary need, at the expense of programmatic and therapeutic services which might otherwise be available.

Participation of Residential Facilities in Other USDA-Sponsored Programs

As stated earlier in the report, the Department of Agriculture operates a number of comprehensive food assistance programs, which to date have only touched residential institutions tangentially at best. Most institutions are, because of exclusionery regulations, ineligible for all of these programs. The exceptions primarily involve the National School Lunch and Breakfast Programs, which may operate with limited financial support in institutions which have a recognizable school on their grounds. In addition,



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maternal care homes may, under certain circumstances, be eligible for the Supplemental Feeding Programs for Women, Infants and Children. Drug rehabilitation centers may be able to use Food Stamps (although currently none in Texas do), and attempts are now underway to bring the Special Food Service Program for Day Care and Head Start Centers, as well as the Summer Feeding Programs into those institutions which appear to qualify on the basis of their non-residential programs. While in most cases participation in other USDA programs is prohibited by various legal technicalities, lack of information and excessive red tape also play a part in keeping otherwise eligible facilities out of such programs as School Lunch and Brakfast. As an offshoot of The Children's Foundation investigation into the food service problems of Texas institutions, a number of facilities have been made newly aware of other USDA programs had have been assisted to apply for them.

By far the highest participation of Texas children in residential care is in the federally subsidized school lunch and special milk programs authorized under the National School Lunch Act. It provides public and non-profit private schools, including those on the grounds of residential institutions, with the following assistance:

1. A partial per meal reimbursement which covers part of the cost of each lunch or breakfast served, including administrative costs; (As of September, 1974, the available reimbursement rate was 13 cents.)



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2. Roughly 7 cents worth of donated commodities per meal, including a special category of preferred commodities not available to institutions;

3. Special grants toward equipment costs.

The Special Milk Program for schools provides a set reimbursement for each carton of milk served to a child who does not receive the school lunch.

None of the facilities in the target area operate a school on their grounds except the state operated institutions, who participate freely in this program. Otherwise nearly all the institutions whose children attended community schools participated in the School Lunch Program and felt that it was of great benefit to their children.

Yet few Texas institutions are able to take advantage of any of the USDA's more comprehensive family and child nutrition programs. In part, red tape and general confusion about the programs are to blame. In part, the special requirements of many residential facilities make some of the programs unusable. In a few cases legislation clearly prohibits their participation. In almost all cases, however, changes in one or another aspect of the Department of Agriculture regulations governing the respective programs would greatly increase their accessibility for residential institutions.



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Without these necessary changes, institutionalized children will remain the only children not protected under the National School Lunch and Child Nutrition Acts which were charged in 1948 with the authority "to safeguard and protect the health and well-being of our nation's children." Without public concern and support, institutionalized children will continue to inhabit a half-hidden world in which nothing is certain--not even three full meals a day.

## III.

## THE TEXAS CONFERENCE

> Everyone of us here today has an obligation to see that our children get every possible benefit. Our children cannot vote.... Griping among ourselves and not having ourselves heard nationally does no good.
>
> Leland Hacker, Director
> Lena Pope Home
> Fort Worth, Texas

On January 24, 1975, The Children's Foundation in cooperation with Texas United Community Services held a Conference on Food Needs of Residential Child-Caring Facilities in Texas. The conference, made possible by a grant from the Galveston-based Moody Foundation, was held in Austin.

Thirty-three (33) persons attended the conference -- dieticians and nutritionists and representatives of eighteen (18) Texas facilities, SDPW Commodity Division, and Texas UCS.



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A. PROBLEMS

During the morning session, participants discussed both problems they had with participation in the commodity distribution program (1-7) and general problems they must face. The majority of participants currently participate in the commodity distribution program. Mr. Wayne Kuykendall and Mrs. Katherine Shelton of the Commodity Division joined The Children's Foundation staff in answering any questions. Both expressed their willingness to assist any participants in correcting individual problems. Among those discussed were:

1. The cutback in commodity distribution points in the state, from 16 to 6. In order to facilitate deliveries, it was suggested that institutions "double up" with school and service institution deliveries. One participant felt that it was not worth it to travel so far for so few commodities.

2. Storage of commodities: one facility received its annual allotment in one shipment, which made storage nearly impossible for 36 pounds of butter and 400 pounds of non-fat dry milk. Storage is also a problem for the Commodity Division because if delivery to the institutions cannot be made quickly, then the commodities must be stored in commercial warehouses at state expense.

3. Smaller range of available commodities: there is no longer a choice of commodity items available to Texas institutions. The number of available items has dwindled to butter and non-fat dry milk. Whereas once participants could requisition some items and reject some items, now the regional USDA offices tell the state office what is coming into Texas.

4. There are no more monthly shipments into the state and there are no more esitmates.

5. Information gaps between USDA nationally and participating institutions: one participant felt that it was the responsibility of the Department to see the



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food needs of institutions and meet them. The gap should be ceased between producers and institutions, and he felt that was a role USDA should assume. It was further stated that there was a paucity of information from USDA on programs available to institutionalized children, and menus for institutional feeding (using commodities).

6. Eligibility for the donated commodity program has not been extended to include those children living in facilities for ten or less than ten. Their applications are not processed. This works a hardship on smaller group homes.

7. Section 2 ground beef should have been available to institutions: freight cars of ground beef were shipped into Texas for schools. Although the schools could not use it, it was not possible to allow institutions to benefit. Participants felt this was an unnecessary slight.

Other problems, aside from federal commodity distribution were discussed.

8. No state nutritionist: currently there is neither a nutritionist available through SDPW to assist residential facilities nor detailed guidelines from SDPW for food services.

9. Inadequate state sanitation regulations: the State Department of Health has no sanitation inspector and does not enforce the few existing regulations.

10. Slow down in community donations: local bakeries, grocers, churches, and restaurants often gave sizable food donations; yet now that the economy is slowing down, donations have fallen.

11. In order to maintain quality meals the number of children taken in have been reduced as have kitchen personnel.

B. HOW TO STRETCH THE FOOD DOLLAR AND PREPARE FOOD MORE ATTRACTIVELY

During the morning session, participants discussed a variety of alternative sources of food. One facility suggested that the



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others "get to know the game wardens." Poached deer could then be available to institutions through the Department of Wildlife. Another participant suggested that the others investigate "Operation Orphans", a rancher-sponsored hunting camp for children. The child is allowed to bring home whatever he kills on the hunt. Since there are so many institutions, the ranchers must rotate homes, but this is a valuable source of food to participating facilities.

In certain counties, the county extension service will supply free vegetable seed to institutions as well as advice on growing gardens. It was suggested that participants contact their county agent for assistance.

Participants traded "preparation tips" in an effort to share food dollar stretching techniques. Adding fresh fruit to fruit juices, cooking biscuits and using rolled oats in cookies, and mixing non-fat dry milk properly were discussed.

C. RECOMMENDATIONS

1. Institutionalized children should be eligible for a wider range of child nutrition programs.
2. USDA should better publicize the child nutrition programs presently available so that institutions will know everything available.
3. There is a distinct need for a county level sanitation position to be created to enforce existing sanitation regulations.



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4. Comprehensive Sanitation Regulations should be developed under the auspices of the Texas Department of Health.

5. A letter to Secretary Butz should be drafted by those conferees who wish to sign, protesting the cutback in the number of commodities available to institutions in FY 1975.

Circulated for signatures after the Conference ended, the letter to Secretary Butz is printed below. As an indication of the concern of the USDA, no answer has yet been received.

Dear Mr. Secretary:

As Texans vitally concerned about food distribution to children's residential institutions, we want to protest the USDA policy decision to purchase only surplus items for residential institutions.

Despite the fact that Congress extended your authority to purchase at market price the broader range of commodities traditionally available to "charitable institutions", you have seemingly decided not to use the authority vested in you to purchase anything other than items available under Section 416 price support. That has left our child-caring facilities with only butter and non-fat dry milk.

Congress allocated $16.7 million for commodities to institutions of which Texas institutions received approximately 5%. We need that money spent at the market for the selection of Section 32 commodities which we have traditionally received.

We also want to protest the regulation which recently prevented Section 6 ground beef to be distributed to institutions, especially when tremendous amounts remained in freight car lots, too abundant an amount to be used by the schools for which they were intended. The ground beef has been rerouted and stored at considerable expense to the state of Texas, rather than being distributed to the child-caring institutions whose children could have greatly benefited from them.

We urge you to promptly reverse your policy decision and, considering the children in our care, reinstate all grains and oils to lists of commodities available to Texas.

February, 1975



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## APPENDIX A

Statistics and references throughout this report were obtained from either the Questionnaire/Survey, followup visits and/or interviews with the following child-caring institutions:

1. Alternative House, Houston, Texas
2. Austin State School, Austin, Texas
3. Boy's Harbor-Houston Area, La Porte, Texas
4. Baysville, Inc., San Antonio, Texas
5. Buckner Baptist Benevolences, San Antonio, Texas
6. Burnett-Baylard Home, Houston, Texas
7. Central Texas Boys Ranch, Austin, Texas
8. Children's Service Bureau, San Antonio, Texas
9. Depelchin Faith Home, Houston, Texas
10. Family Connection, Houston, Texas
11. Florence Crittendon Services, Houston, Texas
12. Halfway House of San Antonio, San Antonio, Texas
13. Home of the Holy Infancy, Austin, Texas
14. Junction House, Houston, Texas
15. Lasker Home for Homeless Children, Galveston, Tx.
16. Mary Lee Foundation, Austin, Texas
17. Methodist Mission Home, San Antonio, Texas
18. Mexican Baptist Children's Home, San Antonio, Tx.
19. Mission Road Foundation, San Antonio, Texas
20. St. Peter's-St. Joseph's Children's Home, San Antonio, Texas
21. Salvation Army, Houston, Texas
22. San Antonio Children's Center, San Antonio, Texas
23. Settlement Club Home, Austin, Texas
24. Texas Cradle Society, San Antonio, Texas
25. Texas Youth Ranch, Austin, Texas
26. Travis State School, Austin, Texas
27. Triangle Boys Ranch, Houston Area, Alvin, Texas
28. Women's Christian Home, Houston, Texas
29. Youth Services Bureau of the YMCA, Galveston, Tx.
30. Girlstown, USA, Austin, Texas



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# THE CHILDREN'S FOUNDATION D. C. PROJECT

# REPORT ON

# FOOD SERVICE PROGRAMS

# IN RESIDENTIAL CHILD-CARING INSTITUTIONS

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December 15, 1974

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I.

# FOOD PROGRAMS IN DISTRICT INSTITUTIONS: A REPORT OF SURVEY FINDINGS

## Scope of the Survey Project

When Junior Village closed, citizens of the District of Columbia paid close attention. They saw the facility emptied and closed. They read of children with no place to go sleeping in hospital corridors. Then, as though nothing had happened, the focus of news in the Washington Post Metro Section shifted with more current events and interest in Junior Village children trailed off.

Follow-up coverage of the children from Junior Village is indicative of the public attitude toward institutionalized children: little or no concern unless the issues are flashy.

The issue of food service in children's residential institutions is, sadly, never flashy unless children are dying. Yet in light of rising food costs, DHR sluggishness in promptly paying cost of care contracts, the decline of community food donations, and the possible end of USDA commodities to institutions, food service problems are becoming serious in our city. Immediate measures should be taken before those problems become critical.

When The Children's Foundation began preliminary national investigations into food services in children's residential

facilities, we found that most facets of food service were falling apart. Since the deterioration suspected nationally could best be studied through an in-depth local probe, a project was begun in the District of Columbia. Spanning an eight-month period from April to December, 1974, the D. C. Project was funded by the Eugene and Agnes E. Meyer Foundation.

This report is based on research, investigation, survey and interviews touching staff and children in residential care throughout the Metropolitan area.

With the help of Mr. Leroy Miller of Howard University's School of Communications, a questionnaire format was developed specifically for the District target project. The questionnaire corresponded to a national version which was mailed to over 4,200 residential children's facilities across the country. Thirty-two of the District institutions responded, giving it the highest rate of return -- 70% -- in the country.

Each of the 46 institutions operating in, or under the auspices of, the District of Columbia was visited at least twice, some as many as five times. Personnel from all levels were interviewed -- directors, counselors, dieticians and kitchen staff.

Knowing that administrators of public facilities were suspect of any probes following the investigation and closing



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of Junior Village, The Children's Foundation went to authorities for permission. By the end of the project, however, almost all institution personnel had cooperated.

## An Overview of the Facilities and Their Food Service Programs

> "We in the District of Columbia share a responsibility for the some 1,700 children and young people in our residential facilities. The fact that institutions are specifically excluded from federally-supported child nutrition programs is appalling. The fact that food costs have risen more than 30% since 1972 makes this situation even worse.
>
> Walter E. Fauntroy
> Member of Congress
> District of Columbia

Of the 46 child-caring institutions in the District of Columbia with residential programs, 25 are public and 21 are private. Of the public facilities, 23 operate under the Department of Human Resources (DHR), and 2 under the Mayor's Office of Youth Opportunities Services. Five are group homes which contract exclusively with DHR, 15 are facilities which accept referrals from DHR as well as other sources. The only group home in the District which is private, proprietary also contracts exclusively with DHR.

Of the 46 facilities, 32 -- or 70% -- responded to The Children's Foundation survey. Answers supplied on those forms



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are the basis for figures in this report. The actual number of D.C. children currently in residential care is 1,600, although the 46 facilities in which they reside have a maximum capacity of 2,130. (These figures do not include the Crippled Children's Unit at D.C. General Hospital or the juvenile program at the Psychiatric Institute. Neither facility defines itself as residential, althrough children may reside in both as long as six months.)

Meal services vary greatly according to the size or type of a facility, the kind and length of residential care provided, and the philosophy of the staff. At Bolling Youth Base, residents dine in the Airmen's Dining Hall, where meals are served cafeteria style, DHR ten reimburses the base. Gallaudet College Model Secondary School for the Deaf contracts out its food service, the Marriott Educational Food Service provides Gallaudet with meal planning, preparation, and service as well as accounting details, licenses and permits. According to a spokesperson, contracting food services allows the school "greater flexibility in planning and does not require heavy investment in kitchen equipment and personnel."

Informal meals are encouraged by staff in smaller facilities throughout the District. Serving meals at the table "family style" in a central dining area is the most popular.



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In the 3 group homes operated by Special Approaches in Juvenile Assistance (SAJA), counselors and children join together to cook and serve dinner in a family setting. Residents prepare their own breakfast and lunch. At SAJA's Runaway House, residents cook whatever they find in the refrigerator. The Giant Food Company donates two dinners a week. The two 24-Hour Youth Assistance Centers have recently begun a system of transporting hot meals from D.C. General Hospital. Since most of their clients arrive at night, after meal deliveries from the Hospital have stopped, counselors still find themselves treating children to late night meals. At DHR's Halfway House for the Mentally Retarded, all residents must eat out. Their only kitchen equipment consists of a small refrigerator for cold drinks and fruit. Each resident receives a weekly check of $55 to $60, of which about half is spent on restaurant meals. The Halfway House has been unable to procure a contract with DHR for installing minimal kitchen facilities, despite efforts since October, 1973, to clear up all the red tape.

Whatever the nature of their meal service programs, all facilities, large and small, shared certain things in common. First, most of them were pessimistic about the future of any improvement in their food service programs. A good number believed their situation already critical. Second, many administrators were totally unaware of what other facilities might

have in the way of programs or generally what options they have in the face of a continued rise in food prices.

Food Costs and Resources for District Institutions

No one is starving in the District's residential child-caring facilities, but food cost increases are being painfully felt in many ways. There have been menu changes: the quantity of the food served has been reduced and sometimes quality has declined. The Episcopal Center has had to increase the percentage of meat extenders used in their meat dishes. "Choplets" are being substituted for pork chops at the Hospital for Sick Children. RAP, Inc., has cut out extra servings and serves less fresh fish, fruits and vegetables. The Hillcrest Children's Center indicated that if food prices are not stabilized soon, their menus would also have to be drastically changed.

At the conference facility administrators noted, "our children are being fed but they are not being fed well...we can only afford starches..we cannot give our children enough greens, fresh fruits, and vegetables." A SAJA counselor commented that neither the quantity nor quality of food being served is adequate. These comments take on tragic dimensions when one considers that there are hundreds of children residing in physical rehabilitation programs who have special dietary needs.

Small independent facilities feel the food cost crunch the most. They are not able to purchase in bulk quantities because of limited storage space and the small number of children served. Most shop at local retail stores rather than wholesale markets. Unlike independent group homes, DHR Aftercare Group Homes combine their monthly orders for bulk purchasing, although they lack storage space as well.

Cost increases may be reflected in other areas of the operating budgets. All facilities surveyed are forced to take monies from other areas such as clothing and transportation to compensate for higher food costs. For example, independent group homes which contract with DHR will reimburse $62 per child per month for food for 1975. Yet that allows $2.06 per meal per child or $0.39 less than the actual amount spent by D.C. facilities for food per child per day. In all these facilities money, from other budgetary areas pays the remaining food bill. SAJA complained, for example, that they have had to postpone much needed house repairs, furniture and clothing in order to buy food. The Catholic Charities Residence staff found themselves choosing between food and house renovations. The counselors used their own money to build a basketball court for the boys. Due to increased food costs they have no money to take their boys out on trips.

The other effects of food cost increases are staff cutbacks

and increased tuition fees. The Florence Crittenton Home which takes primarily private referrals, says that they will have to make cuts in salaries and services in addition to increasing fees. Florence Crittenton's total budget has increased by $114,000 since 1972, yet they are serving fewer meals. By early December the Hospital for Sick Children was $4,500 over its 1974 budget. They will receive a 30% budget increase for next year but "it probably won't be enough to cover costs," according to Hospital staff. There are 70 vacant positions at DHR-operated Glenn Dale Hospital, which will see a budget cut of one-half million dollars next year. Presently Glenn Dale is operating on the same budget that they had three years ago.

According to figures on the survey responses average cost of meals per child per day in D.C. is $2.45. The amount budgeted to cover those meals, averaged, is $2.07. Too many facilities operate in the red as this chart indicates:

| Facility | Budget Cost Per Child Per Day | Actual Cost Per Child Per Day |
|---|---|---|
| Catholic Charities Home | $1.66[1] | $2.67 |
| Cedar Knoll | .69 | 1.65 |
| Episcopal Center | 1.00 | 2.12 |
| Florence Crittenton | 1.66[1] | 2.67 |
| Forest Haven | .30 | .44 |
| Juvenile Justice Project | 2.60 (approx.) | 2.20 (approx.) |
| Maple Glen | .69 | 1.65 |
| National Involvement Inst. | 1.66[1] | 2.10 |
| Oak Hill | .69 | 1.65 |
| SAJA Second House | 1.43 | 1.43 |
| Salvation Army | 1.65 | 1.80 |
| Y-Capitol Hill Tower | 1.66[1] | 1.73 |

[1] Allotment figures only apply to children contracted through DHR.



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The average percent over budgeted amounts as reflectd in the chart is an astounding 70.6%.

From 1974 to 1975, the average rise in food costs per child in D.C. was $11.40. A sampling of D.C. institutions below shows how food costs rose during the year:

| Facility | Monthly Food Costs 1974 | Monthly Food Costs 1973 |
|---|---|---|
| Episcopal Center | $ 1,917 | $ 1,666 |
| Florence Crittenton | 3,000 | 2,333 |
| Forest Haven | 45,502 | 39,385 |
| Gallaudet Model Secondary School for the Deaf | 2,616 | 1,527 |
| Glenn Dale Hospital | 42,250 | 36,335 |
| Hillcrest Children's Center | 1,416 | 1,000 |
| Hospital for Sick Children | 6,000 | 5,100 |
| Ionia Whipper Home | 858 | 750 |
| Juvenile Justice Project | 300 | |
| National Children's Center | 3,583 | 2,833 |
| National Involvement Inst. | 76 (per child per month Sept. 1974) | 58 (per child per month April 1974) |
| R.A.P. Inc. | 325 | 175 |
| St. Gerturde's School | 1,416 | 1,238 |
| SAJA-Other House | 288 | 225 |
| Salvation Army | 212 | 180 |

Food cost increases ranged from a high of 85.7% to 14%. In no less than half the cases, where estimates were possible, food placed second among all budgetary items. Though food costs did not represent an exceptionally large portion of budgets (with a few notable exceptions), the relationship between food costs and other budget items is clearly changing, with food



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costs on the increase at the expense of other expenditures.

DHR: Payment of Cost-of-Care

In addition to rising food costs, contracting facilities must also cope with the problem of getting their reimbursements from DHR on time and in some cases, getting them at all.

For 1975, DHR has increased the rate of cost-of-care for children by $12 to $112 per month. Although the entire $12 was earmarked for food, bringing the food budget to $62 per child, it represents a 20% increase when food costs increased approximately 30% in the District during 1974. An NII administrator remarked, before the increase, that "DHR reimbursements are ridiculously low. They haven't been changed in two years." In facilities for which the average meal costs $2.45, the $2.08 per day per child from DHR must be supplemented by other budgetary areas. When a child is a District ward, it is the responsibility of the District -- and not the institution contracted -- to provide ample care. If the Catholic Charities group home receives $62 per month per child for food but spends $80 per month per child on food, then the home -- under present circumstances -- must find that $18 per child somewhere else in its budget.

According to Carl Selsky, Division of Youth Group Homes for the District, DHR allows flexible food budgeting



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for the group homes he administrates. "We feed the children well," he told The Children's Foundation. Unfortunately, the independent group homes do not get similar treatment from DHR.

Payments of contracted care are notoriously slow. Staff have paid for food for children from their own paychecks until contract payments arrive. Others have stalled creditors, indeed lost their credit standings, awaiting DHR checks. The National Involvement Institute has had to wait as long as six months for reimbursement monies from DHR. Their cooks have gone up to three weeks without pay so that the children they serve may eat. Because of DHR's failure to reimburse on time, the National Involvement Institute lost their trained staff of social workers. Florence Crittenton resorted to threatening DHR with court action in order to get the money owed them released.

The system of reimbursement serves as a deterant to good well planned food service. After a new facility has opened, the money that is spent for the first month's groceries will not be repaid by DHR until three months later. By that time there are more food bills to pay. New facilities cannot withstand this burden. It was suggested at the Conference that new facilities should receive an initial prepayment for the first month's food bill. The reimbursement process is further compounded by the fact that it takes 23 steps for a reimbursement voucher to pass through DHR. Delayed payments jeopardize the facilities' relationships with grocers, to say the least.

The National Children's Center says that it is not as easy to get merchants to extend credit as it used to be due to the pattern of late reimbursements. Within DHR itself, the Youth Group Homes suffer because no merchants want to accept government purchase orders for fear that they might have to wait six months for payment. DHR facilities are further hampered by a stipulation saying that contracting facilities must take bids for any purchase or contract $10,000 or over. Many District facilities have long standing relationships with wholesalers who understand their reimbursement problems. While these wholesalers may not have the cheapest prices, they are willing to wait for their bills to be paid because of these long standing relationships. Understandably, some facilities have expressed a definite unwillingness to change wholesalers.

## II.

## FEDERAL FOOD ASSISTANCE IN RESIDENTIAL CHILD-CARING INSTITUTIONS

### Commodity Distribution in the District of Columbia

> "You know, one time last April we couldn't even get our commodities because the circus was in town and [the circus trains] had blocked off the commodity delivery car so we couldn't get to it."
>
> A head cook
> District of Columbia

The District of Columbia does not face any more substantive



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problems with the commodity program from the national level than many other recipients. However, distribution as it is handled through the Department of Food Services of the D.C. Public Schools is a bureaucratic mess. For this reason, a number of institutions, particularly smaller ones with a high rate of resident population turnover, have not made maximum use of the program. Some are unaware of the existance of the program and some who do participate have no idea how the program operates. They simply know that occasionally someone calls and tells them to pick up certain foodstuffs at some location. If they have the time and the transportation, they go. Only the largest institutions seem able to make good use of the program, and even here there were definite problems.

One of the key problems noted by many institutions was a lack of communications with the Food Service Branch once the initial application was approved. DHR's Youth Group Homes were not even notified of the reinstatement of the commodities program. As facility administrators come and go, the communication gap widens to the point that some facility directors have no idea of how they become involved in the program, or why they receive what they receive. In addition, few facilities know what they might expect in future shipments.

This chart summarizes participation of District facilities in the commodity distribution program. Although the facilities

listed below participate, only a portion make full or regular use of the program. This helps explain why many institutions could not identify in precise financial terms what contribution the donated commodities made to their overall cost structures.

| Participating Facility | Eligible Children In Total Caseload | Children in Residence |
|---|---|---|
| Florence Crittenton Home | 60 | 46 |
| DHR-Youth Group Homes | 70 | 125 (approx) |
| Receiving Home | 23 | 30 |
| CHILDREN'S CENTER: | | |
| Forest Haven | 513 | 500 |
| Cedar Knoll | 209 | 225 |
| Maple Glen | 74 | 100 |
| Oak Hill | 145 | 150 |
| Glenn Dale Hospital | 46 | 42 |
| Hillcrest Children's Center | 36 | 36 |
| RAP, Inc. | 0 | 21 |
| St. Elizabeth's Hospital | (2775)* | 35 |
| Ionia Whipper | 8 | 21 |
| Salvation Army | (204)* | 4 (average) |
| National Children's Center | 82 | 43 |
| SAJA | 30 | 31 |
| Total | 1296 | |

* These facilities do not list the number of eligible children included in their caseloads. The figures in parentheses are the total number of eligible persons for whom they are receiving commodities.

The four Children's Center institutions operate a National School Lunch Program in the schools on their grounds, consequently none, by law, may participate in the regular commodity program for residential institutions. While they receive a wider selection of commodities for school lunch, these commodities may not be used for other meals or snacks in the institutions' residen-



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tial food services program nor can they be used for children residing in the institution but not attending the institution's school. The word most people used to describe the distribution system was "erratic". All too often notifications to pick up commodities ranged from two to twenty-four hours before scheduled pick up time. If a facility failed to pick up at the appointed time, the commodities were offered to someone else. Only institutions with their own transportation and extra staff were able to respond regularly. The Hospital for Sick Children was dropped from the list of commodity recipients because they failed to pick up their assigned commodities after they were notified 3 hours earlier. No institution, moreover, is permitted to stockpile more than three month's worth of a single commodity even though in some cases, commodities were only being distributed every six months. The Florence Crittenton Home was even required to return foodstuffs that were not used up in three months. On the same day recently, one SAJA facility received a phone call instructing them to pick up peanut butter from the Old Soldiers Home, while another SAJA facility was separately instructed to pick up rice at the same location. It seems fairly clear that the Department of Agriculture has chosen not to use the broad authority given it by the Congress "to purchase commodities on the open market in order to maintain the traditional levels of commodity donations".

Commodities were not distributed 3 or 4 months before legislation to extend the program was passed (FY 1975). Then it took the distribution machinery 3 to 4 months to "gear back up" after the legislation became law. Since D.C. only has quarterly commodity distribution, these facilities missed out on two deliveries. Such irregularity makes menu planning, with commodities, almost impossible.

For FY 1975 the number of donated commodities has dropped to two items for District institutions. Non-fat dry milk and butter, although needed in light of higher food costs, do not nearly represent the range of items formerly received. What is sadder, they are distributed ineptly; sadder still is the decline of quality of foods available to institutions. One counselor said her commodities "would be okay if there just weren't so many bugs in the cornmeal when it arrived". Rancid peanut butter is frequently received. Elimination of both cornmeal and peanut butter from distribution seems to have cleared up those complaints. There is no doubt that commodities received by institutions have always been no more than hand-me-downs which are not used by the schools or other programs. In fact, in the District this is stated USDA policy, as printed in the DHR June, 1973, Semi-Annual Report on the Supplemental Food Program in the District of Columbia.

Donated foods in the warehouse that show visible damage, and that are considered unusable by the Supplemental Food Program, USDA, should be collected monthly for re-distribution to institutions.

Many times the type and amount of the commodity donated was not suitable to the recipient agency. SAJA received 50 pounds of salad oil for five children but didn't get enough butter.

Given the problems of excessive red tape at application time, erratic delivery systems, unpredictability of commodity types and quantities, and the often poor quality of the food-stuffs, a large number of District facilities have understand-ably declined participation in the program. An increasing number are dropping out as the selection of available commodities declines even further. In the words of one food service staff member at the Hospital for Sick Children, "the commodities are nothing really substantial and not worth the trip down there".

Participation of Residential Facilities in Other USDA Sponsored Programs National School Lunch: Special Milk Program

The majority of children in residential care in the District attend classes; many of them -- most notably those at the Children's Center and in group homes -- eat federally subsidized lunches under the National School Lunch Act. Also legislated under that Act is the Special Milk Program

The Florence Crittenton Home and DHR's Youth Group Homes are among the District facilities participating in the Special Milk Program who feel that the reimbursement rate in this program is inadequate. Florence Crittenton is subsidized 5¢ per half-pint while they are spending 14¢ per half-pint. Due to communication problems, DHR Youth Group Homes are still receiving 2¢ per half-pint when they are eligible to receive more.

Of the ten facilities in the District which are eligible for the National School Lunch and Breakfast Programs because of schools on their grounds, only the Children's Center facilities at Cedar Knoll, Oak Hill and Maple Glen participate in both school lunch and school breakfast. The National Children's Center participates in school lunch only. Although during the writing of this report, St. Gertrude was in the process of enrolling in the National School Lunch Program, it was recently learned that they had decided against making application. The amount of paperwork was so overwhelming that they would have had to hire an accountant to deal with it. They were told that they would also have to change their system of checking entirely. The principal described the paperwork as "unreasonable and unrealistic" and said, "at 8¢ a breakfast, it's not worth it to hire a bookkeeper. We'd end up paying more to receive the benefits. It might work in a big institution but not for us."



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The other institutions with schools list various reasons for their non-participation. The Gallaudet Model Secondary School for the Deaf simply finds contracting out for its meal service to be more satisfactory and less of an administrative chore, even though it is costly. The Florence Crittenton Home has a school on its grounds, but does not participate in the School Lunch Program. They were told their participation would require their contracting for food services with one of the District School System's central kitchens and sending someone down each day to pick up prepared meals. They would also have had to purchase a $1,000 heating-cooling unit for storing the prepared lunches. The Hospital for Sick Children operate three types of day schools. Administrators complain that the paperwork involved with all the food assistance programs is overwhelming and that no one program provides coverage for all the children. If there were one blanket program, the paperwork would be much reduced and the Hospital would most likely participate.

Some of the staff in schools participating in the lunch and breakfast programs confirm the suspicions of those who choose not to participate. As one director remarked, "We have gotten more trouble than food". When the National Children's Center was applying for school lunch assistance, the paperwork consumed the time of their bookkeeper and social worker for

two and one-half months. Forms were returned later for corrections. The cook at the Center added that when the switch was made to the school lunch program, two officers from the District Distribution Agency came to take back all but one can of peanut butter left over from the last shipment of commodities distributed under the Commodities to Institutions program. Since the school lunch program provides a much wider range of commodities, this action seems motivated by nothing more than bureaucratic pigeon-holing.

The food manager for DHR's Institutional Care Services Division (ICSD), told The Children's Foundation that neither the school food program nor the summer feeding program provides any assistance for dinners, weekend meals, or snacks. This causes a hardship in budget planning for the Children's Center, whose food program he manages. He feels that reimbursement rates are too low across the board and have not taken rising food costs into account. Institutions like his are bound in because DHR regulations state that facilities receiving outside aid shall have their funds from DHR reduced accordingly. He also noted that because the Children's Center participates in the school food program, the Center cannot get donated commodities under the Commodities to Institutions program for use in dinner and weekend meals.

Forest Haven is the only residential facility located at

Children's Center whose 505 children cannot participate in the School Breakfast and the National School Lunch Programs. It is not a school, so these children can receive only institution commodities. The justified complaint of the food manager at Children's Center is that "if all these children are out here, why can't they all receive the same food benefits?" He brought up a good point at the Conference when he noted that children living with their families can benefit from two food programs, NSLP and food stamps. But institutionalized children can either get commodities to institutions or NSLP, but not both.

Many children in District facilities attend community public schools, and eat federally-subsidized school meals. Most pay full prices for their meals, however. As one group home director put it, "Just trying to get a free lunch identifies the kid as being in a home".

"No matter what you do, the other kids always know who's getting a free lunch," an administrator at the National Involvement Institute added.

## Special Food Service Program for Day Care and Head Start Centers (SFSP)

Can residential child-care institutions in the District which also operate day programs for children of eligible age be eligible for the SFSP. This has never been clarified. Of

the facilities in the District, only the National Children's Center has attempted to apply for the program, on behalf of their day program for physically handicapped children. The first response the Center received to its inquiry was that "there is no such program". Over the next several months the Center received a variety of contradictory answers from officials in the District and in USDA's Child Nutrition Office. The Latest determination from USDA is that the Center is not eligible, but the Center's staff were not given any explanation of why or how that determination was made.

## III.

## DISTRICT OF COLUMBIA CONFERENCE

Summary notes from the December 3, 1974 Working Conference on Food Support Needs of Residential Child-Caring Facilities are reprinted as distributed to conferees.

### CONFERENCE SUMMARY FROM STAFF NOTES

Twenty-four (24) persons attended the conference as representatives of thirty-seven (37) D.C. facilities.

I. PROBLEMS

During the morning session, participants discussed problems they had with federal food programs available to them and the local agencies administering them. There seemed to be a consensus that the time had come when D.C. child-caring facilities would need more food assistance from USDA than the donated commodities -- in present quality and quantity -- could provide. Problem areas brought up and discussed by participants:

(1) The quality of commodities is often poor.
(2) The quantities of commodity foods are either too large or too small, depending upon the size of the facility.
(3) Storage: smaller facilities have no place to keep the large amounts they receive.
(4) Erratic delivery: commodities were not distributed 3 or 4 months before legislation to extend the program passed (FY 1975). Then it took the distribution machinery 3 to 4 months to "gear back up" after the legislation became law. Since D.C. only has quarterly commodity distribution, these facilities missed out on two deliveries. Such irregularity makes menu planning, with commodities, almost impossible.
(5) Low priority: children's institutions fall behind schools and hospitals in receiving commodities requested.
(6) Recall of unused items: if inventory lists indicate that certain commodity items have not been used, a facility is asked to return those items without compensation.
(7) Communication: the facilities lack a continuing contact with either DHR or the Food Service Branch (D.C. Public Schools), a contact essential for efficient operation of the commodity program (FSB) or contractual care (DHR).
(8) Many participants felt that DHR attempted to undermine privately operated child-caring facilities and would ultimately like to close all but public facilities.
(9) Paperwork is extensive for those who participate in federal food programs. Paperwork for the commodity program is negligible in comparison to that for school lunch and the special milk program. Many felt this problem could be eliminated if children in institutions were given blanket eligibility.
(10) Institutionalized children cannot participate in certain other federal food assistance programs either because of USDA policy or D.C. regulations on USDA policy.
(11) Institutionalized children are singled out as such, and are intimidated by, the clearly illegal practice in D.C. public schools of issuing tickets to children receiving free or reduced price school meals. When they choose not to eat lunch at school, the facility must assume that expense.
(12) Finally, rising food costs have meant that facilities have had to shuffle food budgets, cut program expansion, and cut back on supplemental staff and field trips in order to provide nutritionally adequate meals.

It was concluded that the concept on which the commodity distribution program to institutions was first founded -- "Captive consumers" for farm surpluses -- was no longer a reality and a new concept -- that institutionalized children were being fed, but not being fed well -- should be recognized.

## II. ASSISTANCE CONFEREES ASKED OF THE CHILDREN'S FOUNDATION

Participants requested, and The Children's Foundation offered to obtain the following information:

(1) A list of the amount of each available commodity item each eligible child is entitled to receive monthly.
(2) A monthly list of how much money USDA spends to purchase each commodity item for consumption by D.C. institutions.
(3) Dates and time of any hearings regarding institutional food programs before the Senate Select Committee on Nutrition and Human Needs.

The Children's Foundation will send all participants a copy of correspondence with the Department of Agriculture on the first two points and will supply any information on hearings when they are made available to us.

## III. ALTERNATIVE FOOD ASSISTANCE FOR CHILD-CARING FACILITIES

Alan Stone, General Counsel for the Senate Select Committee on Nutrition and Human Needs, informed participants that authorization for all child nutrition legislation ends June 30, 1975.

This led to discussion of possible inclusion of residential facilities for children in the wider range of child nutrition programs. As one participant noted, "we have watched [food programs for] schools and day care centers get better while [our food programs] have gotten worse."

Participants offered these as possible new ways to extend food services to child-caring institutions.

(1) To see that legislation extending USDA authority to purchase commodity foods at market price is passed for not just one year, but for perhaps three years.
(2) To ask that institutions be eligible to purchase foods through a system of government issue modeled after those foods available through a military commissary.
(3) To legislate to tie residential child-caring facilities into the Special Food Services Program with a concrete level of reimbursement per meal served.
(4) To write a new section of The Child Nutrition Act designed for residential facilities which might offer a USDA option to give cash and/or commodities on a dollar base; such legislation would contain an escalator clause.

Participants agreed that if new legislation were written, it would ideally include:

(a) blanket eligibility;
(b) all non-profit licensed residential child-caring facilities or child-caring hospitals;
(c) a "hold harmless" clause to prevent states from dropping their purchase-of-care-rates;
(d) the right to hearings prior to cut-offs from the program;
(e) start-up money for any new facility -- a one-time prepayment;
(f) matching funds from state, municipality, community, or United Fund;
(g) non-food assistance.

Points (a) through (g) were included in the body of the conference's first long-term recommendation.

Should residential child-caring facilities be included in, perhaps, the Special Food Services Program at the day care center rate of cash reimbursement, it would mean an annual expenditure of $111.7 million for institutions alone.

The conference ended with a participant review and amending of recommendations offered on behalf of D.C. residential child-caring facilities by The Children's Foundation.



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## APPENDIX

Statistics and references throughout this report were obtained from either the Questionnaire/Survey, follow-up visits and/or interviews with the following child-caring institutions:

1. Allison Residence
2. Area "C" Community Mental Health Center
3. Bolling Youth Base
4. Catholic Charities Residence
5. D.C. Children's Centers:
   - Cedar Knoll
   - Forest Haven
   - Maple Glen
   - Oak Hill
6. Cole Residence
7. Community Treatment Center
8. D.J. Nellum Group Home
9. Episcopal Center for Children
10. Florence Crittenton Home
11. Ford Residence
12. Gallaudet's Model Secondary School for the Deaf
13. Girard Residence
14. Glenn Dale Hospital
15. Halfway House for the Mentally Retarded
16. Harvard Residence
17. Hillcrest Children's Center
18. Hospital for Sick Children
19. Ionia R. Whipper Home
20. James Residence
21. Juvenile Justice Project Group Home
22. National Children's Center
23. National Involvement Institute
24. Park Road Residence
25. R.A.P., Inc. Residence
26. Receiving Home for Children
27. Rhode Island Residence
28. St. Elizabeth's Hospital, Area "D" Youth Program
29. St. Elizabeth's Hospital, Richardson Division Youth Program
30. St. Gertrude's School
31. Salvation Army, Emergency Shelter
32. SAJA Other House
33. SAJA Runaway House
34. SAJA Second House
35. SAJA Third House
36. Temporary Emergency Family Shelter
37. 24-Hour Youth Assistance Center #1
38. 24-Hour Youth Assistance Center #2
39. Tucker Residence
40. William Residence
41. YWCA Residence Intervention Center



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